2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006027

Entity Name: FLORIDA WASH RITE, INC.

WILLIAMSON, RICK

OAK PARK, IL 60302

14 SUMMER ST STE 302

Name:

Address:

City-St-Zip:

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
14 SUMME MALDEN, I	ER STREET, : MA 02148	SUITE 302	14 SUMMEI 302 MALDEN, M	
Current M	ailing Addre	ss:	New Mailin	g Address:
14 SUMME MALDEN, I	ER STREET, : MA 02148	SUITE 302	14 SUMMEI 302 MALDEN, N	
FEI Number:	58-2159667	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:
The above	FON, FL 3343		nurnose of changing its	
	e of Florida. RE:			s registered office or registered agent, or bo Date
SIGNATUF	e of Florida. RE: Electro	nic Signature of Registered Ag		
SIGNATUF	e of Florida. RE: Electro	nic Signature of Registered Ag	gent	
SIGNATURE Election Can OFFICERS Title: Name: Address:	e of Florida. RE: Electro npaign Financir S AND DIRECTO PDS (ANDERSON, C	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete BREGORY STREET, SUITE 302	gent	Date
SIGNATUR Election Can OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electro Inpaign Financir S AND DIRECT PDS (ANDERSON, C 14 SUMMER S MALDEN, MA	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete GREGORY STREET, SUITE 302 02148) Delete HARRY ST STE 302	gent ADDITIONS Title: Name: Address:	Date 6/CHANGES TO OFFICERS AND DIRECT
SIGNATUF	e of Florida. RE: Electro Inpaign Financir S AND DIREC PDS (ANDERSON, C 14 SUMMER S MALDEN, MA CFO (ANDERSON, H 14 SUMMER S MALDEN, MA	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete GREGORY STREET, SUITE 302 02148) Delete HARRY ST STE 302 02148) Delete //ID ON ST	Gent ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	Date 6/CHANGES TO OFFICERS AND DIRECT () Change () Addition CFO (X) Change () Addition ANDERSEN, HARRY 14 SUMMER ST STE 302

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HARRY ANDERSEN CFO 04/07/2008