FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G14984

(0)

SUPERIOR CAR WASH, INC.

Principal Place of Business Mailing Address 915 EAST MAIN ST. 915 EAST MAIN ST.									
815 EAST MAIN LAKELAND FL 3			LAKELAND FL 33801-5128						
						3. Date Incorporated or Qualified 12/23/1982		ate of Last Ri	eport
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			plied For
21		26				59-2238014	8014 Not Applicable S8.75 Additional		
Suite, Apt #, etc.		Suite, Apt. #, etc.	· · ·			5. Certificate of Status Desired		\$6.75 A	
City & State	3	City & Stale				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zip	Countr	у		8. This corporation has liability for i		_	199.032,
24	25 9. Name and Address of Curr	29 29 Agent	30			Florida Statutes 10. Name and Address of New Re		No Agent	
MAY	, RICHARD C.		8	1	Name		,,,,,,,,		
4921	SOUTHFORK DRIVE		8:	2	Street Addre	ess (P.O. Box Number is Not Acceptab	ible)		
LAKE	ELAND FL 33813		83	3	······································				
			84	4	City			85 Zip (Code
							<u>FL</u>		
office or re	to the provisions of Sections 607 C egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such change wa	as authorized b	ov tl	named corp the corporati	oration submits this statement for the p ion's board of directors. I hereby accep-	urpose o	of changing it pointment as	s registered registered
SIGNATURE	in tarrillar wire, and accept the op-	ingations of, deciral cor.cood	, i londa olatok	.J.J.					
Signaturic Typest of pender chain eicht constered agent and title if appricable (NOT				Registered Agent signature requi			DATE		
12. TOLE	OFFICERS A	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS AN	Change	S IN 12 Addition
NAME	BICAN, WARREN		1.2 NAME					C orange	
STREET ADDRESS	915 EAST MAIN ST.			STREET ADDRESS					
CITY - ST - ZIP	LAKELAND FL		14 CITY -	ST-	- ZIP				
TITLE	٧	DELETE	2 1 TITLE					Change	Addition
NAME	BICAN, ROSEMARY		2.2 NAME	Ξ					
STREET ADDRESS	915 E MAIN ST			2.3 STREET ADDRESS					
CITY - ST - 7IP				2 4 CITY-ST-ZIP				Change	Addition
TITLE NAME		L) betch	3.1 TILE					☐ Onlinge	□ Audition
STREET ADDRESS			3.3 STRE		DORESS				
DITY-ST-7IP			3.4 CITY						
TITLE		☐ DELETE						Change	Addition
NAME	4.2		4. 2 NAM	4. 2 NAME					
STREET ADDRESS			4.3 \$1RE	ET AI	DDRESS				
CITY-ST-ZIP			4.4 CITY	-51-	- ZIP				
TITLE		DELETE						Change	Addition
NAME.			5.2 NAMI						
STREET ADDRESS			5.3 STRE		Ī				
CITY - ST - ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DELETE	5.4 CITY		- ZIP			☐ Change	Addition
TITLE		☐ DETER	61 THE					∟ cuange	LT MUUUDII
NAME CTRCLY ADDRESS			62 NAM		rountes				

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

CITY-ST-ZIP

8-97 94/6874811

FILED

Jan 14 1997 8:00am

Secretary of State