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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

BISCAYNE CAR WASH, INC.:

**FILED** May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- I BODAN OODD HIND TENET LOUIS OLIN BINT PIEN BADIN DIGHT DIDHE BADIN DADIN TAGU				
10550 BISCAYNE BLVD 10550 BISCAYNE BLVD 14621 SW 65TH AVE 14621 SW 65TH AVE									
MIAMI FL 33		MIAMI FL 33138 US				DO NOT WRITE IN THIS SPACE			
US						3. Date Incorporated or Qualifie	d		
						05/17/1983			
	Place of Business	2a. Mailing Address				4. FEI Number		Ap	pplied For
21 10550 BISCAYNE BY 726 10550 BISCAYNE BY 726 Suite, Apt. W. etc.				AINE BLUD		59-2289026			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & Stat	e	City & State			6. Election Campaign Financing			<del></del>	
23 MIAMI FL		28 MAMI FL			Trust Fund Contribution	, D	\$5.00 Added		
Zip	Country	Zip	Coun	try		8. This corporation owes or has			
24 23	138 25 US	29 33138	30 L	.s		Personal Property Tax due Ji			No
	9. Name and Address of Current I	Registered Agent	Ī			10. Name and Address of New		Agent	
SMITH, GARY V.					8				
1230 NW 7 STREET					t Addres	ss (P.O. Box Number is Not Accer	table)		
MIAMI FL 33125						SS (1.0. BOX HUMBON IS NOT ACCOUNT	nainoj		
			[6	3		······································			
				4 City		· · · · · · · · · · · · · · · · · · ·		<b>85</b> Zip i	Code
							FL	. 1   `	i
office or a	to the provisions of Sections 607.0502 a registered agent, or both, in the State of	and 607.1508, Florida Statute I Florida: Such change was a	es, the about outhorized	ove-name by the co	d corpor progration	ration submits this statement for th n's board of directors. I hereby ac	e purpose o cent the apr	changing it	s registered   registered
11. Pursuant to the provisions of Sections 607.050? and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typod or printed name of registered agent is	and tale d applicable ANOTE	Pagistared	Acant sicons	es rooulead	when reinstating)	DATE		
12.	OFFICERS AND I		13.	-gork algrida	ne required	ADDITIONS/CHANGES TO OF		DIRECTOR	IS IN 12
TITLE	DP	☐ DELETE	1.1 TITL	E	1	7.007710.107010.11020.10.01		Change	Addition
NAME	MULHOLLAND, ISABEL R.		1.2 NAME		1			_	
STREET ADDRESS	A AGGA COLL APPLIA A SP		1.3 STRI	1.3 STREET ADDRESS					Į,
CITY - ST - ZIP	MIAMI, FL 00000		1.4 CiTY	-ST-ZIP					
TITLE	V	☐ DELETE	2.1 TITL	E	<del></del> -			Change	Addition
NAME	MULHOLLAND, STEPHEN		2.2 NAME						
STREET ADDRESS	14621 SW 65 AVENUE	2.3 \$7		2.3 STREET ADDRESS					
CITY - ST - ZIP	AMARAL PI		2. 4 CIT	2. 4 CITY+ST-ZIP					
TOTUE	ST	☐ DELETE	3.1 TITLE		1			Change	Addition
NAME	MULHOLLAND, JAMES			ΙE					
STREET ADDRESS	A A A A A A A A A A A A A A A A A A A		3.3 STRE	EFT ADDRESS	;				
CITY-ST-ZIP	and the Pt		3.4. CITY	Y-ST-ZIP					
TITLE	☐ DELETE 4.1		4.1 TITU	E				Change	☐ Addition
NAME			4. 2 NAN	<b>NE</b>	1				
STREET ADDRESS			4.3 STRE	ET ADORESS					
CITY-ST-ZIP			4.4 CITY	- \$1- ZIP					
TITLE	DELETE 5.1 TI		5.1 TITLI	E				Change	Addition
NAME			5.2 NAM	IE .					
STREET ADDRESS			5.3 STRE	EET ADDRESS					1
CITY-ST-ZIP			5.4 CITY	-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLI	E .				Change	Addition
NAME			6.2 NAM	IE.					.
STREET ADDRESS			6.3 STRE	ET ADDRESS	. ]				
CITY-ST-ZIP			6.4 CITY	- ST - ZIP					
14 I hereby o	certify that the information supplied with	this filing does not qualify for	r the exen	ontion eta	ted in Se	ection 119 07(3)(i) Florida Statute	e I further ce	rtify that the	information

Intereory certain the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied 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 is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address

SIGNATURE:

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