

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G60587**

(4)

1. Corporation Name

LIBERTY SQUARE WASH BOWL, INC.



Principal Place of Business

**3500 BROADWAY
RIVERA BEACH FL 33404
US**

Mailing Address

**7636 STEEPLECHASE DR
PALM BEACH GARDENS FL 33418
US**

2. Principal Place of Business

21 State, Apt. # etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 State, Apt. # etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**FUHRMANN, RICHARD
7656 STEEPLECHASE DR
PALM BEACH GARDENS FL 33418**

3. Date Incorporated or Qualified

09/21/1983

3a. Date of Last Report

04/26/1995

4. F.E. Number

59-2301232

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 671, 672, and 673, 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, Sections 671, 672, and 673, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that it is true and correct. I further certify that the information included in the 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. I am an officer or director of the corporation or the receiver or business empowered to execute this report as required by Chapter 667, Florida Statutes, and that my name appears in Block 12 or Block 13 or changes of corporate officers and directors.

SIGNATURE:

Richard C. Fuhrmann

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD C. FUHRMANN

April 4, 1996

407-840-0058

CR2E034 (12/95)