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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 MOCUMENT # H02846

(4)

PLAYGROUND PROFESSIONAL CARWASH, INC.

Principal Place of Business Mailing Address 909 MAR WALT DRIVE STE 1014 909 MAR WALT DRIVE STE 1014 FT. WALTON BEACH FL 32547 FT. WALTON BEACH FL 32547-6711 3. Date Incorporated or Qualified 3a. Date of Last Report 05/09/1984 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2434926 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. # etc \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zio 210 Country This corporation has liability for intangible tax under s. 199.032, Yes 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name FOSTER, WILLIAM SCOTT 909 MAR WALT DRIVE STE 1014 82 Street Address (P.O. Box Number is Not Acceptable) FT. WALTON BEACH FL 32547 83 64 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. Land familiar with land accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Styricture, typics or printed name of registered agent and the if applicable (NOT€: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 13, 12. PSTD DELETE 1.1 TITLE Change Addition THE ZANT. MARGARET B. 1.2 NAME CR2E034 NAM? 913 NW MAR WALT DRIVE 1.3 STREET ADDRESS STREET ADDRESS FORT WALTON BEACH FL 32547 1.4 CITY-ST-2IP CITY - ST DELETE Addition 2.1 TITLE ☐ Change 1961 NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS 2 4 City-ST-ZIP CITY-ST-ZP DELETE Addition 3.1 TITLE Change TILLE NAME 3.2 NAME 3.3 STREET ADDRESS STRUCT ADDRESS 3.4. CITY-ST-ZIP 0(1Y - ST - ZIP DELETE Change Addition 4.1 Title E THE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

14. I do nereby 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.

4.4 CITY - ST- ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 City-S1-Zip

5.4 City - ST - ZIP

51 TITLE 52 NAME

6.1 TITLE

6.2 NAME

SIGNATURE

011Y-51-7F

STREET ADDRESS

STREET ADDRESS

C(17 - 51 - 7)P

OTY-ST ZIP

101

841.9

THE

NAME

SKANKTURE AND TYPED OR PHINTED NAME OF STANING OFFICER OR DIRIGIOR

DELETE

DELETE

4-28-97

Daytime Phone #

Change

Change

FILED

May 06 1997 8:00am

Secretary of State

0488929

Addition

Addition