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| | PROFIT | FLORIDA DEPAI | RTMENT OF STATE | May 18 1 | 998 8:00a |
| CORPORATION ANNUAL REPORT 1998 | | | B. Mortham | Secretary of State | |
| | | | ary of State CORPORATIONS | | |
| | MENT # H81 WAY INTERNATIONAL | | <u></u> | | |
| OFEED | | CAR WASH, INC. | | I HANDEN HUN MANN KANK KANA | |
| ncipat Plac | e of Business | Mailing Address | | | |
| | RCLE NORTH | 108 GULL CIRCLE NORT | н | | |
| DAYTONA BEACH FL 32119 DAYTONA BEACH FL 321 | | | | DO NOT WRITE IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified | ITIS SPACE |
| Dele ele el D | lace of Business | | | 10/21/1985 | |
| | | 2a. Mailing Address | | 4. FEI Number 59-3287614 | Applied For |
| 32.5 / 2 / 5 / 5 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / Suite, Apt. #, etc. | | | | | Not Applicable |
| City & Stat | 0 | 27 City & State | | | Fee Required |
| City & State City & State | | | | Election Campaign Financing Trust Fund Contribution | Added to Fees |
| | | | Country | 8. This corporation owes or has paid | |
| ~ ~ | g Name and Address of (| 29 Current Registered Agent | 30 | Personal Property Tax due June 30 10. Name and Address of New Regis | |
| DE | NKERT, BRUCE M. | | 81 Name | 10. Auto and Address of New Hoga | storen Agent |
| | B GULL CIRCLE NORTH | | 82 Street Add | dress (P.O. Box Number is Not Acceptable |) |
| DA | YTONA BEACH FL 32119 | | 83 | | · · · · · · · · · · · · · · · · · · · |
| | | | | | |
| | | | 84 City | | FL 85 Zip Code |
| office or re | to the provisions of Sections 60 ogistered agent, or both, in the | 27.0502 and 607.1508, Florida Statut State of Florida, Such change was a | es, the above-named con authorized by the corpora | rporation submits this statement for the pur ation's board of directors. I hereby accept t | pose of changing its registered he appointment as registered |
| | п натыга win, анд ассерт пе | Ponigations of, Section 607.0505, Fic | orida Statutes. | | |
| | Signature: typen or protoid name of registe | · · · · · · · · · · · · · · · · · · · | | | |
| | OFFICER | | E: Registered Agent signature requ | | |
| | PS | Cereid agent and the Trappicable (NOT) TS AND DIRECTORS DELETE | E. Begistered Agent signature required agent signature required agent signature required agent a | uired when reinstating) ADDITIONS/CHANGES TO OFFICE | |
| · · · · · · · · · · · · · · · · · · · | PS Denkert, Bruce M. | IS AND DIRECTORS | 13. | | RS AND DIRECTORS IN 12 |
| E ET ADORESS | PS DENKERT, BRUCE M. 108 GULL CIRCLE NOR | | 13. 1.1 HILE 1.2 NAME 1.3 STREET ADDRESS | | RS AND DIRECTORS IN 12 |
| ET ADORESS - St- ZIP | PS Denkert, Bruce M. | | 13. 1.1 HTLE 1.2 NAME | | RS AND DIRECTORS IN 12 |
| E ET ADORESS - ST - ZIP | PS DENKERT, BRUCE M. 108 GULL CIRCLE NOR | IS AND DIRECTORS | 13. 1.1 HTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP | | RS AND DIRECTORS IN 12 |
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