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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90141 012 ***158.75

1. Corporation	MENT # J38598 ND HEIGHTS CAR WASH, I	INC.			
Oringinal Place	o of Business	Mailing Address	··	I HARPINAR DIANG INTOL HAIDE DISID HAIDE SOUR SOUR	
Principal Place of Business 14596 CARVER DR MIAMI FL 33176 US		C/O BOSTIC 14150 SW 122 CT. MIAMI FL 33186		_DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/20/1986	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		26		59-2747212	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible
24	25	29	30	Personal Property Tax.	☐ Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Register	ed Agent
BOSTIC, CARMENA 14150 SW 122 CT. MIAMI FL 33186		83	dress (P.O. Box Number is Not Acceptable)	85 Zip Code	
54	•		. 84 City	F	L 83 Zip Code
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen	of Florida. Such change was at tions of, Section 607.0505, Flor at and title if applicable. (NOTE:	Athorized by the corporation Statutes. Registered Agent signature requirements.		pointment as registered
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	PD POSTIC DONALD D	☐ DELETE	1.1 TITLE		
NAME	BOSTIC, DONALD R		1.2 NAME		
STREET ADDRESS	14150 S.W. 122ND COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33186 STD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE	BOSTIC, CARMENA M		2.2 NAME		
NAME	14150 S.W. 122ND-COURT		2.3 STREET ADDRESS		
STREET ADDRESS	MIAMI FL 33186				
CITY-ST-ZIP TITLE	Mil-duil 1 E 35 100	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME .	- ·		3.2 NAME		_ ,
			3.3 STREET ADDRESS		•
STREET ADDRESS CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	·		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition .
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
		•	64 CITY-ST-ZID		I

14. I 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, with all other like empowered.

SIGNATURE: