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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J745

J74525

(3)

CHOO CHOO CAR WASH, INC.

Principal Place of Business

Mailing Address

## FILED Mar 26 1998 8:00am Secretary of State



2418 FRENCH AVENUE SANFORD FL 32771		2418 FRENCH AVENUE SANFORD FL 32771		DO NOT WRITE IN THIS SPACE	
				<ol> <li>Date Incorporated or Qualified</li> <li>05/27/1987</li> </ol>	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		26 1424 SHADWELL CIRCLE			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<del></del>	A Flatin Orangia Flamba	
23		28 HEATHRO	W. FL.	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 29 32746	Country  O U S A	8. This corporation owes or has paid the co	urrent year Inlangible Yes  No
24	25 9. Name and Address of Curren	29 32746 :	301 0 3 7 7 7	Personal Property Tax due June 30.  10. Name and Address of New Registered	
THOMAS, BRYAN M			L	. BASIL SAVARI	
401 SOUTH ROSALIND STREET SUITE 100				ress (P.O. Box Number is Not Acceptable)	CIRCLE
	LANDO FL 32801		83	24 SHADWELL	CIRCLE
<u> </u>					
			84 City HE	FATHROW FI	_ 85 Zip Code 32746
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corp	poration 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 this obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	1000000	Simply Prices	SIDENI	<u> </u>	22-98
	Signature, typied or printed name of registers 1 age		Registered Agent signature requir		
12.	OFFICERS ANI	D DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD Savard, L. Basil	☐ OELETE	1.1 TITLE		Clarife C Montion
NAME	1424 SHADWELL CIRCLE		1.2 NAME		
STREET ADDRESS	HEATHROW, FL 32746		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CTY-ST-ZIP 2.1 TILLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME	SAVARD, ROSALIND E		2.2 N ME		
STREET ADDRESS	1424 SHADWELL CIRCLE		2.3 SWEET ADDRESS		
CITY-ST-ZIP	HEATHROW, FL 32746		2. 4 ( + ST - ZIP	#1.	
TITLE	SD	DELETE	3.1		Change Addition
NAME	STERCHI, JAMES R JR		3.2 N AE		
STREET ADDRESS	2008 HIBISCUS CT		3.3 SEET ADDRESS		
CITY-ST-ZIP	SANFORD FL		3.4. C TY-ST-ZIP		
TITLE	1D	<b>▼</b> DELETE	4.1 TITLE		Change Addition
NAME	SAVARD, LOUIS B JR		4.2 NAME		
STREET ADDRESS	111 ESTATE CIRCLE		4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY FL		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		L Change L Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		Transition of the second	6.4 CITY-ST-ZIP	Continue 110 07/200) Florida Ptatuton Lituribus	

I. 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 eath; 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.