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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # K10892

(3)

EXPRESS CAR WASH OF DELRAY, INC.										
<b>SUITE 1950</b>	of Business Oward Boulevard Vale Fl 33394-C079	SUITE 1950	500 EAST BROWARD BOULEVARD							
							3. Date Incorporated or Qualified 01/06/1988 3a. Date of Last Report 04/10/1995			
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			<u>`</u>	Applied For
21		26				65-003	<b>65-0032584</b> Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of	Status Desired			Additional Required
City & State		City & State	City & State			6. Election Can	npaign Financing			May Be
23		28	-			Trust Fund C	, ,			to Fees
Zip	Country	Zip	Cou	intry		8. This corpora	tion has liability for		under s	199.032,
24]	25	29	30			Florida Statu		No No		
<del></del>	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and /	Address of New I	A Deserginger	gent	
DOVIE	CONDID									
BOYLE, CONRAD J. 500 E. BROWARD BLVD.				82	Street Ad	dress (P.O. Box Numb	ss (P.O. Box Number is Not Acceptable)			
SUITE 1				83						
FT. LAUDERDALE FL 33394-3079									Toe 1 7	o Code
				84				FL		
11. Pursuant to or registere familiar with	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric n, and accept the obligations of, Sect	and 607.1508, Florida Statut da. Such change was authoriz ion 607.0505, Florida Statutes	es, the abored by the is.	corp	named corp oration's b	poration submits this st pard of directors. There	atement for the pu by accept the app	irpose of char pointment as r	ging its r egistered	egistered office Lagent. Lam
SIGNATURE _	Signature typed or printed name of registered agent	and title if andicable (NC	OTF: Begistered	Agen	nt signature reg	uired when reinstating)		DATE		
12.	OFFICERS AN		13.	. 40			CHANGES TO OF	FICERS AND	DIRECT C	SRS IN 12
TITLE	DPT DELETE		1. 1			Change [		☐ Addition		
NAME	SHULLMAN, RICHARD		1.2 N	AME						
STREET ADDRESS	500 E.BROWARD BLVD.#205	50	1.3 S	1.3 STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL				IT - ZIP				Chan	- Addition
TITLE	S CHURANAN DIOMADD	☐ DELETE	2 1 1					L	Change	Addition
NAME	SHULLMAN, RICHARD 500 E. BROWARD BLVD 205	Λ.	22 N							
STREET ADDRESS	FT. LAUDERDALE FL	·U			ADDRESS					
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CITY-SI-ZIP					ST - ZIP					
TITLE		DELETE	4, 1	TITLE					Chang:	☐ Addition
NAME			4.2 N	IAME						
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TITLE		DELETE		TITLE					] Change	Addition
NAME				IAME						
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP		- Driette			ST-ZIP				Change	Addition
TITLE		☐ DELETE		TITLE	ļ			L	j Orlange	
NAME	, i			AME	LIBRASOS					
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP		. 100 -	6.4 0	JIY-8	ST-ZIP	f. fa. the averantian of	ated in Section 116	0.02/2VIA Elor	do Statu	tee Lighter

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), 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 cath; 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.

SIGNATURE: SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96 30738-72W