### 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L03000009365

1. Entity Name

BAY AREA 24-7 CAR WASH, LLC



Principal Place of Business

Mailing Address

6654 - 78TH AVENUE NORTH PINELLAS PARK, FL 33781 6654 - 78TH AVENUE NORTH PINELLAS PARK, FL 33781

### FILED Apr 18, 2006 8:00 am Secretary of State

04-18-2006 90010 023 \*\*\*\*50.00



DO NOT WRITE IN THIS SPACE

02072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0921951 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

SCHULER, TIMOTHY C 9075 SEMINOLE BLVD. SEMINOLE, FL 33772

# DO NOT WRITE IN THIS SPACE

	i. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar value obligations of registered agent.	vith, and accept
SIC	SIGNATURE	

(NOTE: Registered Agent signature required when reinstating)

#### Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YEPES, CARLOS A 6654 - 78TH AVENUE NORTH PINELLAS PARK, FL 33781
TITLE NAME STREET ADORESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filling does not qualify for the

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated in the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated on this report is true and accurate and that the information indicated is accurate and the information indicated in the inf

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-11-06

727-536-8686

Daytime Phone