2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000108292

1. Entity Name
PALM AUTO WASH, LLC



Principal Place of Business

606 NORTH RIDGEWOOD AVE. EDGEWATER, FL 32132

Mailing Address

606 NORTH RIDGEWOOD AVE. EDGEWATER, FL 32132

FILED Jan 22, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1684262 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 little il applicable

DANIELS, DOUGLAS A 501 N. GRANDVIEW AVE., 3RD FLOOR DAYTONA BEACH, FL 32118

DO NOT WRITE IN THIS SPACE

| | 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 the obligations of registered agent. | am familiar with, and accept |
|----|---|------------------------------|
| SI | SIGNATURE | |

Filing Fee is \$50.00 Due by May 1, 2007 U00000598641 01/24/07-80084-012 50.00

| ! | | |
|--|---------------------------|--|
| 9. | MANAGING MEMBERS/MANAGERS | |
| TITLE | MGRM | |
| NAME | QUIRK, RICHARD | |
| STREET ADDRESS | 606 NORTH RIDGEWOOD AVE. | |
| CITY-ST-ZIP | EDGEWATER, FL 32132 | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CHY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| 11. I hereby certify that the information supplied with this filing does not qualify for the | | |

DO NOT WRITE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing 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 my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver of rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X Cacher Denne

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

17/07 386.438.