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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L46107

(3)

ALL FLORIDA CAR WASH, INC.

FILED	
Feb 11 1997 8:00am]
Secretary of State	



2. Principel Place of Business 2e. Mailing Address 3e. Fle Number App. 1 App. 26 App. 4, etc. Sec. 1781848 No. 20 Suite. Apt. 4, etc. Sec. 1781848 No. 22 Suite. Apt. 4, etc. Sec. Certificate of Status Desired \$8.75 A. 22 Sec. Certificate of Status Desired \$8.75 A. 22 Sec. Certificate of Status Desired \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of Status Desired Agent Agents of Sec. Certificate of Status Desired Agent Agents of Sec. Certificate of Status Desired Agent Agents of Sec. Certificate of Status Desired Agent \$8.75 A. 20 Sec. Certificate of))) (# 1)				
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9. Name and Address of Current Registered Agent MULLEN, DOUGLAS J. 2453 E ROAD LOXAHATCHEE GROVE FL 33470 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes. the above-named corporation submits this statement for the purpose of changing its 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 a agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICE RS AND DIRECTORS 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. OTY-ST-2P ITIE MAME SIREET ADDRESS CITY-ST-2P LOXAHATCHEE GROVE FL DELETE 1 TITLE DELETE 1 TITLE 1 TITLE DELETE 1 TITLE C Change C	99.032,				
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14. I do 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.

SIGNATURE:

Sour CA MULL DIES WINT

49-6-97 (954)537-0553