## 2007 LIMITED LIABILITY COMPANY

## Apr 03, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L99000001195 04-03-2007 90122 005 \*\*\*\*50.00 SPARKLE CAR WASHES, LLC Principal Place of Business Mailing Address 60031846 575 2ND AVE. SOUTH 575 2ND AVE. SOUTH ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 Chg-LLC CR2E083 (12/06) 4. FEI Number Applied For City & State City & State 59-3560598 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ANDERSON, STEPHENSON Street Address (P.O. Box Number is Not Acceptable) 220 34TH STREET NORTH ST. PETERSBURG, FL 33713 Zip Code FI 8. 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 with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee Is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10 9. Change MGRM TITLE ☐ Addition TITLE ☐ Delete ANDERSON, STEPHENSON NAME NAME 4914 59TH AVENUE SOUTH STREET ADDRESS STREET ADDRESS St. Petersburg, FL 33715 CITY-ST-ZIP TIERRA VERDE, FL. 33715 CITY-ST-2IP Delete ☐ Addition MGRM TITLE TITLE ANDERSON, JOHN E JR. NAME NAME STREET ADDRESS 202 PASS-A GRILLE WAY SOUTH STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST. PETERSBURG BEACH, FL 33607 Delete Change MGRM ☐ Addition TITLE TITLE DEAN, DAVID M NAME NAME 7211 Frisco Lane STREET ADDRESS STREET ADDRESS 7211 FIRSCO LANE CITY-ST-ZIP CITY-ST-ZIP SARASOTA, FL 34241 MGRM ☐ Defete TITLE Change ☐ Addition TITLE GAINES, MARY ANN NAME NAME 8453 CYPRESS LAKE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA, FL 34243 TITLE Change Addition ☐ Defete TITLE MGRM SOUZA, MARK A NAME NAME STREET ADDRESS STREET ADDRESS 6844 SUPERIOR STREET CIRCLE CITY-ST-ZIP SARASOTA, FL 34243 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

whis filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the empowered to execute this report as required by Chapter 608, Florida Statutes. 11. Thereby certify that the information supplied with indicated on this report is true and accurate and limited liability company or the receiver or truste

STREET ADDRESS

CITY-ST-ZIP

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

STREET ADDRESS

CITY-ST-ZIP

Date

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FILED