FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 15 AM 10:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M74297** **(6)**

1. Corporation Name
WASH CLUB OF FLORIDA, INC.

Principal Place of Business	Mailing Address
~~290 NE 68TH STREET~~ 297 N.E 67 Street P.O. BOX 380578 MIAMI FL 33238-7578	~~290 NE 68TH STREET~~ P.O. BOX 380578 MIAMI FL 33238-7578

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/29/1988
3a. Date of Last Report: 03/16/1994

2. Principal Place of Business
21: 297 NE 67 ST.
22 Suite, Apt. #, etc.:
23 City & State: MIAMI, FLA.
24 Zip: 33138 25 Country: USA

2a. Mailing Address
26: P.O. Box 380578
27 Suite, Apt. #, etc.:
28 City & State: MIAMI, FLA
29 Zip: 33238-0578 30 Country: U.S.A.

4. FEI Number: 65-0046037 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STEINER, MICHAEL S.
290 N.E. 68TH STREET
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~DVP~~	1.1 TITLE	☐ Change ☐ Addition
NAME	~~STEINER, WILLIAM K.~~	1.2 NAME	
STREET ADDRESS	~~290 NE 68TH ST~~ DELETE	1.3 STREET ADDRESS	DELETE
CITY-ST-ZIP	~~MIAMI FL~~	1.4 CITY-ST-ZIP	
TITLE	DPS	2.1 TITLE	DPS ☒ Change ☐ Addition
NAME	STEINER, MICHAEL S.	2.2 NAME	STEINER, MICHAEL S.
STREET ADDRESS	~~290 NE 68TH ST~~ 297 N.E 67 ST	2.3 STREET ADDRESS	297 N.E. 67 ST.
CITY-ST-ZIP	MIAMI FL 33138	2.4 CITY-ST-ZIP	MIAMI, FLA 33138
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(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, added or deleted.

SIGNATURE: _____ PRES 1/23/95 (305) 754-4551
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #
MICHAEL S. STEINER

0431870 FR