

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAY 15 AM 10:15

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P01000005310

1. Entity Name
THE CAR WASH CAFE, CORP.



Principal Place of Business
14875 NW 77 AVE.
SUITE 206
MIAMI LAKES, FL 33014

Mailing Address
14875 NW 77 AVE.
SUITE 206
MIAMI LAKES, FL 33014

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZARICH, ALEX
14875 NW 77 AVE.
SUITE 206
MIAMI LAKES, FL 33014

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

PD
ZARICH, ALEX
14875 NW 77 AVE.
MIAMI LAKES, FL 33014

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

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TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

21 515

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS I HAVE DOWNLOADED THE UBR FORMS. I AM
ENCLOSING THE UBR FORMS ALONG WITH A CHECK PAYBLE TO THE FL.
DEPARTMENT OF STATE.

I NEVER RECEIVED THE FIRST NOTICE FOR THE 2003 UNIFORM BUSINESS
REPORT.

CORDIALLY

A handwritten signature in black ink, appearing to be 'Alex Zarich', enclosed within a large, loopy oval shape.

ALEX ZARICH
PRESIDENT

A handwritten signature in black ink, appearing to be 'Jose Borgongno', written in a cursive style.

JOSE BORGONGNO
DIRECTOR