## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 22, 2004 08:00 AM Secretary of State DOCUMENT # P01000084773 1. Entity Name WALLY WASH, INC. Principal Place of Business Mailing Address 11998 INDIAN ROCKS RD 11998 INDIAN ROCKS RD LARGO, FL 34644 LARGO, FL 34644 03082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3756348 Not Applicable \$8.75 Additional Property of the second 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent s with our about T NANCY KELLER DO NOT WRITE 4020 64 ST. N. IN THIS SPACE SAINT PETERSBURG, FL 33709 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) 9. Election Campaign Financing **\$5.00** May Be U00000125841 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 04/23/04-80010-008 150.00 10. OFFICERS AND DIRECTORS TITLE NAME KELLER, NANCY STREET ADDRESS 4020 69 ST N CITY-ST-ZIP SAINT PETERSBURG, FL 33707 The state of the s 4.7 NAME STREET ADDRESS Traff washing ! CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRÉSS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

NTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**