

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2002 8:00 am
Secretary of State

02-03-2002 90016 035 ***150.00

DOCUMENT # P01000088760

1. Entity Name

ASSOCIATED WASH INTERNATIONAL, CORP.

Principal Place of Business

2100 NW 22ND ST.

POMPAÑO BEACH FL 33069

Mailing Address

2100 NW 22ND ST.

POMPAÑO BEACH FL 33069

2. Principal Place of Business

500 S OCEAN WAY

Suite, Apt. #, etc.

VILLA 6

3. Mailing Address

500 S OCEAN WAY

Suite, Apt. #, etc.

VILLA 6

City & State

DEERFIELD BEACH, FL.

City & State

DEERFIELD BEACH, FL.

Zip

Country

33441 USA

Zip

Country

33441 USA

4. FEI Number

65-1142887

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SISSON, LARRY

218 SOUTHERN COUNTRY LN.

QUINCY FL 32351

7. Name and Address of New Registered Agent

Name

ROBERT F. GARDNER

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

500 S OCEAN WAY

VILLA 6

City

DEERFIELD BEACH, FL

FL

Zip Code

33441

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.

SIGNATURE

ROBERT F. GARDNER
Robert F. Gardner to be the Registered Agent

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

1/22/2002

9. This corporation is eligible to satisfy its Intangible

tax filing requirement and elects to do so.

(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> Delete
NAME	KELCH, MICHAEL D	
STREET ADDRESS	2100 NW 22ND ST.	
CITY-ST-ZIP	POMPAÑO BEACH FL 33069	
TITLE	DP	<input type="checkbox"/> Delete
NAME	GARDNER, ROBERT F	
STREET ADDRESS	500 S. OCEAN WAY V6	
CITY-ST-ZIP	DEERFIELD BEACH FL 32835	
TITLE	DST	<input type="checkbox"/> Delete
NAME	GARDNER, MARY K	
STREET ADDRESS	500 S. OCEAN WAY V6	
CITY-ST-ZIP	DEERFIELD BEACH FL 32835	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

ROBERT F. GARDNER, PRES
Robert F. Gardner

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

1/22/2002 954-418-0872

CR2E034 (9/01)