

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 27, 2004 8:00 am**  
**Secretary of State**

08-17-2004 90002 005 \*\*\*550.00

|   |  |   |   |   |  |
|---|--|---|---|---|--|
| <b>DOCUMENT # P02000007589</b><br>1. Entity Name<br><b>CURLEW CAR WASH, INC.</b>  |  |   |   |   |  |
| Principal Place of Business<br><b>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b>  |  |   | Mailing Address<br><b>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b>  |   |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.   |  | 3. Mailing Address<br>Suite, Apt. #, etc.   |   | <b>66432718</b><br><br>   |  |
| City & State  |  | City & State  |   | 07012004    Chg-P    CR2E034 (10/03)                              |  |
| Zip   |  | Country   |   | 4. FEI Number <b>33-0995910</b><br><b>APPLIED FOR</b>             |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |  |   |   | Applied For<br><input type="checkbox"/> Not Applicable            |  |
| 6. Name and Address of Current Registered Agent<br><br><b>KRUG, STEWART L<br/>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b>  |  |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b> Zip Code</span> |   |  |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____   |  |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$550.00<br/>Due by September 8, 2004</b>   |  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>P<br/>HUTTO, GREG<br/>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b> <input checked="" type="checkbox"/> Delete |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>SE Pres<br/>KRUG, STEWART L<br/>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b> <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>VP Sect<br/>WARNER, DAVID<br/>1545 S BELCHER RD<br/>CLEARWATER, FL 33764</b> <input type="checkbox"/> Delete    |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
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| 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:  |  |   | <b>Stewart L. Krug Pres</b> 8/9/04    727 560 0386  |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  |   | Date    Daytime Phone #   |   |  |