2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000012703

Address:

City-St-Zip:

Entity Name: PLEASANT HILL CAR WASH, INC.

FILED Apr 25, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2380 NIGHTINGALE LANE 1549 PLEASANT HILL ROAD KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** 2380 NIGHTINGALE LANE KISSIMMEE, FL 34746 FEI Number: 01-0594243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETERS, RAYMOND H 2380 NIGHTINGALE LANE KISSIMMEE, FL 34746 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition PETERS, KATHY G T Name: Name: 2380 NIGHTINGALE LANE Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: PETERS, RAYMOND H PRES 2380 NIGHTINGALE LANE Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete FULLILOVE, IAN VP Name: Name: 10325 BLUE CLAWS LANE Address Address: City-St-Zip: City-St-Zip: LAS VEGAS, NV 89135 Title: () Delete Title: () Change (X) Addition FULLILOVE, CARL S Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

10325 BLUE CLAWS LANE

LAS VEGAS, NV 89135

SIGNATURE: KATHY PETERS T 04/25/2003