## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 08, 2006 8:00 am Secretary of State

ANNUAL REPURT						Secretary of State					
1. Entity Name	iė.	# P0200006 CAR WASH INC.							6 90299 04	42 ***150	0.00
Principal Place	e of Business	9	Mailing Add	ress				UBYBYb	1		
Principal Place of Business 5421 EDGEWATER DR			-	5421 EDGEWATER DR			•	•			
ORLANDO, FL 32810				ORLANDO, FL 32810			•				
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2. Principal Place of Business 3127 Dudley Dr.			31	3. Mailing Address 3127 Dudley Dr Suite, Apt. #, etc.							
Suite, Apt.	#, etc.	1	Suite, Apt.	. #, etc.			04172006	Chg-P	CR2E00	34 (11/05)	
City & State	tona	, FL	City & Star	el tono	a, FL	<del></del>	4. FEI Number 59-376				oplied For ot Applicable
3273	8	Country	Zip 32	738	Country		5. Certificate	of Status Desired		\$8.75 Add Fee Require	
		and Address of Curre	nt Registered Age	ent	News		7. Name and	Address of New	Registered A	gent	
GREY, ALFRED					Name	61	ey, F	Alfred			
5421 EDGI ORLANDO	<b>EWATER</b>				Street A	ddress (F	P.O. Box Numb	er is Not Accepta	ble)		
011211120	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					312	27 1	oudley )	Dr.		
				_	City	Del	tona		FL	Zip Cod	138
	named entitions of regist	y submits this statement	t for the purpose of	changing its	registered office or	register	ed agent, or bo	th, in the State of	Florida. I am f	amiliar with,	and accept
the obligati	ons or regist	tered agent.									
SIGNATURE_	Signature, lyped	or printed name of registered ago	ent and title if applicable.	(NOT	E: Registered Agent signal	ure required	when reinstating)		DATE		<del></del>
FIL	Signature, lyped	or printed name of registered ago FEE IS \$150.00 6 Fee will be \$550	9. Ele		ign Financing	\$5.	when reinstating)  OO May Be ed to Fees		DATE		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 ap endress, with all other like empowaged.

SIGNATURE:

GNATURE AND TYPEDOR PRINTED NAME OF SIGNING CEPTER OR DIRECT

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