2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2004 8:00 am Secretary of State 04-07-2004 90337 022 ***150.00

Zip Country Zip Country 5. Certificate of Status Desired Agent Status Desir	1. Entity Nam	MENT # P0300002 SSURE WASHING & DE	•			04-0	7-2004 90337	022 ***15	50.00
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20 Country 2p Country 5p Country 5, Cartificate of Status Desired 5s 88.75 Additional Fee Required 6s. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent 7, Name and Address (P.O. Box Number is Nox Acceptable) City FEL 2p Code The above named entity sucmits the statement for the purpose of changing is registered aligner of registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or both, in the State of Forisa. I am familiar with, and each registered agent, or	City & State		City & State			4. FEI Number	335°	Applied For Not Applicable	
S. Name and Address of Current Registered Agent COSME, JOSE Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florata. I am familiar with, and accide the obligations of registered agent. City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florata. I am familiar with, and accidence of registered agent. City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florata. I am familiar with, and accidence of registered agent. City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florata. I am familiar with, and accidence of the purpose of changing its registered office or registered agent. City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent. In the State of Florata. I am familiar with, and accidence of the purpose of changing its registered office or registered agent. SERIOL Agent of the State of Florata. I am familiar with, and accidence of the purpose of changing its registered office or registered agent. In the State of Florata. In the State of Florata. I am familiar with, and accidence of the purpose of changing its registered office or registered agent. In the Address of Florata. In the State of Florat	Zip	Country -	Zip	Country	,			\$8.75 Add	litional
Street Address (P.O. Box Number is Not Acceptable) ALM BEACH GARDENS, FL 33418 City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florida. I am familiar with, and acceptable the obligations of registered agent agent agent agent and see all augustic properties. CINATURE Signalar, lyord or constrained inspersal agent and see all augustic properties. ONATURE Signalar, lyord or constrained inspersal agent and see all augustic properties. ONATURE Signalar, lyord or constrained inspersal agent and see all augustic properties. ONATURE Signalar, lyord or constrained inspersal agent and see all augustic properties. ONATURE Signalar, lyord or constrained inspersal agent and see all augustic properties. ONATIONAL properties. ONATIONAL properties. Signal Augustic properties. ONATIONAL properties. ONATIONAL properties. Signal Augustic properties. ONATIONAL pr			nt Registered Agent		Name	7. Name and Address	of New Registered A	<u> </u>	
City	1060 VIA	HACIENDA .			Street Address (P.O. Box Number is Not Ad	ceptable)		
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Signature. Speed or portaind regiment all applications. (NOTE: Propriement Applies Signature required which constitution). Added to Fees St. 100 May Be Added to Fees		ons or registered agent.							
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Libereby certify that the information symplied with this filling does not qualify for the examption stated in Section 119 07(3)(- i). Florida Statutes - Liuther certify that the information	REET ADDRESS			STREET					
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