

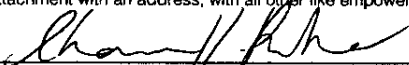


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90238 045 ***150.00

DOCUMENT # P03000047276 1. Entity Name BAY AREA MOBILE DETAIL, INC.					
Principal Place of Business 504 S. KINGS AVENUE BRANDON, FL 33511			Mailing Address P.O. BOX 2091 BRANDON, FL 33509		
2. Principal Place of Business 2111 Shady Point Lane Suite, Apt. #, etc.			3. Mailing Address 2111 Shady Point Lane Suite, Apt. #, etc.		
City & State Brandon, Florida			City & State Brandon, Florida		
Zip 33510		Country USA		4. FEI Number 03-0515903	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RUBESHA, GEORGE 504 S. KINGS AVENUE BRANDON, FL 33511			7. Name and Address of New Registered Agent Name Rubisha, George Street Address (P.O. Box Number is Not Acceptable) 2111 Shady Point Lane City Brandon FL Zip Code 33510		
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:  George Rubesha 3 MAR 2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME RHINEHART, KERSTIN STREET ADDRESS 504 S. KINGS AVENUE CITY-ST-ZIP BRANDON, FL 33511	<input checked="" type="checkbox"/> Delete		TITLE President (P) NAME Shannon Rubesha STREET ADDRESS 2111 Shady Point Lane CITY-ST-ZIP Brandon, FL 33510	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE ST NAME RUBESHA, GEORGE STREET ADDRESS 504 S. KINGS AVENUE CITY-ST-ZIP BRANDON, FL 33511	<input checked="" type="checkbox"/> Delete		TITLE ST NAME RYAN MCTAGGART STREET ADDRESS 2111 Shady Point Lane CITY-ST-ZIP Brandon, FL 33510	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  SHANNON K RUBESHA 3/20/04 813-389-4532 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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