

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000048164

1. Entity Name  
CARWASH TWO, INC.



**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90558 027 \*\*\*150.00

Principal Place of Business  
16 S HARRISON ST  
BEVERLY HILLS, FL 34465

Mailing Address  
16 S HARRISON ST  
BEVERLY HILLS, FL 34465

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04292005

Chg-P

CR2E034 (10/03)

4. FEI Number  
56-2403307

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MAUS, HELEN  
16 S HARRISON STREET  
BEVERLY HILLS, FL 34465

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PCEO ☐ Delete  
NAME MAUS, HELEN  
STREET ADDRESS 16 S HARRISON ST  
CITY-ST-ZIP BEVERLY HILLS, FL 34465

TITLE D ☐ Delete  
NAME MAUS, HELEN  
STREET ADDRESS 16 S HARRISON ST  
CITY-ST-ZIP BEVERLY HILLS, FL 34465

TITLE VP ☐ Delete  
NAME Edward Lommel  
STREET ADDRESS 16 S Harrison St  
CITY-ST-ZIP Beverly Hills, FL 34465

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition  
NAME Edward Lommel  
STREET ADDRESS 16 S Harrison St  
CITY-ST-ZIP Beverly Hills, FL 34465

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Helon Maus*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/05