## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000091309

**DAVIE, FL 33325** 

City-St-Zip:

Entity Name: AMERICAN CARWASH SERVICE & MOBILE DETAIL, INC.

FILED Dec 08, 2004 Secretary of State

Current Pr	incipal Pla	ce of Business:	New Princ	New Principal Place of Business:		
4500 W CC TAMARAC,		_ BOULEVARD				
Current Ma	iling Addr	ess:	New Maili	New Mailing Address:		
4500 W CC TAMARAC,		_ BOULEVARD	1754 S.W. DAVIE, FL			
FEI Number:	20-0175539	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of	f Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
CHEDE, SII 4500 W CC TAMARAC,	MMERCIAL	_ BOULEVARD US				
The above in the State		ry submits this statement for the pur	pose of changing i	ts registered offi	ce or registered agent, or both,	
SIGNATUR	E:					
	Electr	onic Signature of Registered Agent	t		Date	
		193(2)(b), F.S., the corporation did not ring Trust Fund Contribution ( ).	eceive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CHEDE, SID	9TH TERRACE	Title: Name: Address: City-St-Zip:	V (X) C CHEDE, SIDNEY 1754 SW 109TH T DAVIE, FL 33325		
Title: Name: Address: City-St-Zip:	V DA SILVA, JO 920 S. FEDE DANIA, FL 3	ERAL #16A	Title: Name: Address: City-St-Zip:	()C	hange ( ) Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	()C	hange()Addition	
Title: Name: Address:	T TERRACUSO 11422 SW 2	· ·	Title: Name: Address:	P/T (X) C TERRACUSO, JO 1754 S.W. 109 TE		

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.

City-St-Zip:

**DAVIE, FL 33324** 

SIGNATURE: JOSE P. TERRACUSO P/T 12/08/2004