## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000021997

Address:

City-St-Zip:

PO BOX 24712

JACKSONVILLE, FL 32241

Entity Name: CRYSTAL CLEAR AUTO WASH, INC

FILED Apr 28, 2008 Secretary of State

Entity Na	me: CRYSTA	L CLEAR AUTO WASH, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	ANTIC BLVD IVILLE, FL 322	211			
Current Mailing Address:			New Mailing Address:		
PO BOX 2 JACKSON	4712 IVILLE, FL 322	241			
FEI Number	: 13-4273117	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	MICHELE ANTIC BLVD IVILLE, FL 322	211 US	DRUHL, MICHELE PR 7850 ATLANTIC BLVD JACKSONVILLE, FL 3		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE: MICHELE	J DRUHL		04/28/2008	
	Electror	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES ( DRUHL, MICHE PO BOX 24712 JACKSONVILL	?	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR ( DRUHL, DAVID PO BOX 24712 JACKSONVILL	?	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TRES ( DRUHL, ARTHI PO BOX 24712 JACKSONVILL	2	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	DIR (	) Delete HA L MRS.	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: MICHELE J DRUHL PRES 04/28/2008