


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 14, 2006 8:00 am
Secretary of State

05-05-2006 90187 012 ***150.00

DOCUMENT # P04000046769 1. Entity Name POP'S CARWASH INC	
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Principal Place of Business 1210 NW 179TH TERR CORAL CITY, FL 33169	Mailing Address 1210 NW 179TH TERR CORAL CITY, FL 33169
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66018856



02212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 34-1988276	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WHITE, ROBERT L 1210 NW 179TH TERR CORAL CITY, FL 33169

**DO NOT WRITE
IN THIS SPACE**

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: Robert White POPS CAR WASH 4-12-2006
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, ROBERT 1210 NW 179TH TERR CAROL CITY, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, MAXWELL 19221 NW 43RD AVE. CAROL CITY, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, ROBIN 1210 NW 179TH TERR CAROL CITY, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Robert White Owner 6-10-2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #