2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

APPROVED AND FILED

06 APR -3 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000069777

1. Entity Name
MOBILE AUTO WASH AND DETAIL, INC.

Principal Place of Business	Mailing Address
4501 32ND AVE. N. ST. PETERSBURG, FL 33713	4501 32ND AVE. N. ST. PETERSBURG, FL 33713

03282006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
4248 57TH AVE N.	4248 57TH AVE N.
Suite, Apt #, etc	Suite, Apt. #, etc.
City & State: ST. PETERSBURG FL	City & State: ST. PETERSBURG FL
Zip: 33714 Country	Zip: 33714 Country

4. FEI Number: 20-1069473 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BECKUS, KATHLEEN 4501 32ND AVE. N. ST. PETERSBURG, FL 33713	Name: LAUGHLIN, JOHN C. Street Address (P.O. Box Number is Not Acceptable): 4248 57TH AVE. N. City: ST. PETERSBURG FL Zip Code: 33714

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: JohC [illegible] JOHN C. LAUGHLIN 3/29/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAUGHLIN, JOHN C 12805 COLLEGE HILL DR. HUDSON, FL 34667	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LAUGHLIN, JOHN 4248 57TH AVE N. ST. PETERSBURG FL 33714 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ADAMSKI, SHARON L 5200 5TH AVE. N. ST. PETERSBURG, FL 33710	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700070476847 04/14/06--01071--023 **61.25 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BECKUS, KATHLEEN 4501 32ND AVE. N. ST. PETERSBURG, FL 33713	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: JohC [illegible] PRESIDENT 3/29/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOHN C. LAUGHLIN Date Daytime Phone #