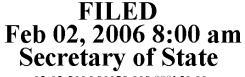
2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P05000111124

SIGNATURE: Elizabeth Pierce



1. Entity Name WEST COAST AUTO DETAILING INC					02-02-2006 90079 009 ***150.00			
Principal Place of Business Mailing Address								
3106 21ST STREET NO 3106 21ST STREET NO ST. PETERSBURG, FL 33713 ST. PETERSBURG, FL 33713					•			
2. Principal Place of Business 1120 Manticello blvd N 1120 Manticello blvd N								
Suite, Apt. #, etc. Suite, Apt. #, etc.			D DIVA	01262006	Chg-P	CR2E034 (11/05)		
City & State St Pete, FL		St Pete, FL		4. FEI Numb	300118		oplied For ot Applicable	
Zip 33703	Pinellas		Country Pinellas		of Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent	Nama	7. Name and	Address of New Re	igistered Agent		
PIERCE, ELIZABETH Name Elizabet					er is Not Acceptable)			
3108 21ST STREET NO Street Address				ddress (P.O. Box Numb Mantice lla	er is Not Acceptable)	7		
ST. PETERSBURG, FL 33713					BIVA N			
City				rt. Pete		FL Zip Cod	e 4 2	
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 E112 aboth Pierce E3 Para (NOTE: Registered Against seguined when re					1-2	28-06 DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10,	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OFFIC	CERS AND DIRECTOR	S IN 11	
ग्राLE	D	☐ Delete	TITLE			☐ Change	Addition	
NAME CONTEX ADDRESS	COTTRELL, RICHARD WIV		NAME					
STREET ADDRESS CITY-ST-ZIP	2490 ALHAMERA CT CLEARWATER, FL 33761		STREET ADDRESS CITY-ST-ZIP					
TITLE	D	☐ Dejete	TITLE	١١ ١ ١ ١ ١ ١		Change	Addition	
NAME	PIERCE, ELIZABETH	L Descrit	NAME	Elizabeth 1120 Mon	PIETCE	L. J. A.	C) Addition	
STREET ADORESS	3106 21ST STREET NO		STREET ADDRESS	1120 Mon	HICENO DI	Va IV	1	
CITY-ST-ZIP	ST. PETERSBURG, FL 33713		CITY-ST-ZIP	5+ Pete,	FL 33	7 <i>0</i> 3		
TITLE		Delete .	TITLE			☐ Change	Addition	
NAME Street adoress	•		NAME Street adoress					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE		**************************************	☐ Change	Addition	
NAME			NAME				_	
STREET ADDRESS City-St-Zip			STREET ADDRESS					
TITLE		☐ Delete	CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		☐ Change	- Addison	
NAME		□ beiete	TITLE NAME			☐ cuants	Addition	
STREET ADORESS			STREET ADDRESS					
CITY-ST-ZIP			CITY+ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADORESS			NAME Street address					
CATY-ST-ZIP			CTTY-ST-ZIP					
	certify that the information supplied with							
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.								