

**2008 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 30, 2008  
Secretary of State**

DOCUMENT# P05000124995

Entity Name: J&T SUPER WASH, INC.

**Current Principal Place of Business:**

5940 SHERIDAN STREET  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

5940 SHERIDAN STREET  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 30-0333797      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMAS, C.P.A., JOSE  
9710 STIRLING ROAD  
101  
COOPER CITY, FL 33024 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: JOSE THOMAS, C.P.A.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: THOMMY, THOMAS E  
Address: 10421 SOUTHWEST 54TH STREET  
City-St-Zip: COOPER CITY, FL 33328

Title: DVST      ( ) Delete  
Name: JOHN, MATHAI K  
Address: 921 SOUTHWEST 96TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: THOMAS E THOMMY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

10/30/2008

\_\_\_\_\_  
Date