2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058457

Entity Name: AUTO SPA DETAILING CO.

FILED May 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17344 NW 74TH AVE 202

MIAMI LAKES, FL 33015

Current Mailing Address: New Mailing Address:

17344 NW 74TH AVE 202

MIAMI LAKES, FL 33015

FEI Number: 56-2647373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SILVEIRA, GERMAN
17344 NW 74TH AVE
UNIT 202

CENTENO, ARIADNA
17344 NW 74TH AVE
UNIT 202

UNIT 202

MIAMI LAKES, FL 33015 US MIAMI LAKES, FL 33015 US

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: GERMAN SILVEIRA 05/16/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: VP (X) Change () Addition

 Name:
 SILVEIRA, GERMAN
 Name:
 SILVEIRA, GERMAN

 Address:
 17344 NW 74TH AVE
 Address:
 17344 NW 74TH AVE # 202

 City-St-Zip:
 MIAMI LAKES, FL 33015
 City-St-Zip:
 MIAMI LAKES, FL 33015

Title: VP () Delete Title: P (X) Change () Addition

 Name:
 CENTENO, ARIADNA M
 Name:
 CENTENO, ARIADNA M

 Address:
 17344 NW 74TH AVE
 Address:
 17344 NW 74TH AVE # 202

 City-St-Zip:
 MIAMI LAKES, FL 33015
 City-St-Zip:
 MIAMI LAKES, FL 33015

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: ARIADNA CENTENO P 05/16/2007