~~ ~2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000149957 1. Entity Name AMERICAN CAR DETAILING INC.						LED -4 AM 1:56	
Principal Place of Business 2860 S.W. 37TH CT MIAMI, FL 33134	W. 37TH CT 2860 S.W. 37TH CT				TALLAHAS	RY ON STATE SSEE, FLORIDA	P(BY) (1 (BÅ)
Principal Place of Business - No P.O. Box # Mailing Address							
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		08312007	Chg-P	CR2E034 (12/06)	
City & State	City & State			4. FEI Numb	er	- 	oplied For
Zip Country	Zip	Country		5. Certificate	of Status Desired	S8.75 Ad	ditional
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent Name				
BORGE, IRVING A 2860 S.W. 37TH CT MIAMI, FL 33134			Street Address (P.O. Box Number is Not Acceptable)				
		City				FL Zip Coo	e
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. Signature, type for printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150 Due by September 14, 2	T 100 10 1			.00 May Be led to Fees	In accordance corporation did	with s. 607.193(2)(b), I not receive the prior	F.S., the notice.
10. OFFICER	S AND DIRECTORS	11.	-	ADDITIONS	/CHANGES TO OF	FICERS AND DIRECTOR	
NAME BORGE, IRVING A STREET ADDRESS 2860 S.W. 37TH CT CITY-ST-ZIP MIAMI, FL 33134	Decade	NAME STREET ADDRES CITY-ST-ZIP	5	93./12	//97==01070	☐ Change }— ○○1 	☐ Addition
TITLE VD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME GUERRERO, FRANCISCO STREET ADDRESS 2860 S.W. 37TH CT MIAMI, FL 33134)	STREET ADDRES CITY-ST-ZIP	s	09,71	D<u>D</u> 1 D 3 : 8/07-0107	595698 0001 **150	.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			☐ 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: SIGNATURE: SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNING OFFICER OR DIRECTOR Date Date Date Date Description of the corporation or the receiver or trustee empowered and 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 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 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 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 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 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 the corporation or the receiver or trustee empowered to execute the corporation or the receiver or trustee empowered to execute the corporation or the receiver or trust							