## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State

## **Katherine Harris**

DIVISION OF CORPORATIONS

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90133 010 \*\*\*150.00

i. Corporation	MENT # <b>P930000</b> CE AUTO DETAILING, INC.	)3434 <sup>-</sup>	1									
Principal Place	e of Business	Mailing Add	ress				(100	11067 118 181		HI 30HA 60131	, 14311 <b>0 10 0 0</b> 10 11	BARA HIBI 1884
•	EST 40TH COURT	3460 NORTH	WEST 40TH COUP	₹T								
LAUDERDALE LAKES FL 33309  LAUDERDALE LAKES FL 33309												
									NOT WRIT	TE IN THIS	SPACE	
							3. Date Inco		or Qualifed			
Principal Place of Business     2a. Mailing Address							05/10/ 4. FEI Num					alled Con
	lace of Business	ê					65-0431270				<u> </u>	oplied For of Applicable
21 Suite, Apt.	# ato	Suite, Apt. #, etc.										Additional
22	#, 6tc.	27	λί. <del>π</del> , σιο.				<ol><li>Certifcate</li></ol>	of Status	Desired		•	equired
City & Stat	e	City & State					6 Election	Campaign	Financing	<del></del>	\$5.00	May Be
23 28			a *				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country Zip				Country			8. This corporation owes the current year Intangible					
24	25	29	30	1			Personal	Property	Tax.	_	☐Yes	□No
,	9. Name and Address of Current I	Registered Ag	ent				10. Name at	nd Addres	ss of New R	egistered	Agent	
101	EO AL DIJONICO			81	Name							
JONES, ALPHONSO					Street	Address	s (P.O. Box N	lumber is	Not Accepta	ble)		
3460 NORTHWEST 40TH COURT												
LAUDERDALE LAKES FL 33309				83							÷	
				84	City		L.J. 177				85 Zip	Code
					1					FL	<u>-                                    </u>	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligatio	Fiorida Such d	change was autho	nnzed hv	the com	corpora oration's	ation submits s board of dire	this stater ectors. I h	nent for the ereby accep	purpose or it the appoi	intment as re	gistered
SIGNATURE			01075.5							DATE		
12.	Signature, typed or printed name of registered agent a OFFICERS AND		(NOTE: Reg	13.	nt signature i	eguirea wi	heri reinstating)	IS/CHANG	SES TO OF		ND DIRECTO	ORS IN 12
TITLE	PD		DELETE	1.1 TITLE		4					Change	Z Addition
NAME	JONES, ALPHONSO			1.2 NAME		2776	+ FIELL	75_				
STREET ADDRESS	3460 NORTHWEST 40TH COURT		12 STREET ADDRESS 89		891	N.W 35	AUC					
CITY-ST-ZIP	LAUDERDALE LAKES FL 33309			1.4 CITY-S		FT.	LAUD.	FL	3330	9		
TITLE	VSTD		☐ DELETE	2.1 TITLE		<del>/                                    </del>					☐ Change	☐ Addition
NAME	JONES, BRENDA		1	2.2 NAME								
STREET ADDRESS	3460 NORTHWEST 40TH COURT	•	,	2.3 STREE	T ADDRESS							
CITY-ST-ZIP	LAUDERDALE LAKES FL 33309			2. 4 CITY-5	ST-ZIP							
TITLE			☐ DELETE	3.1 TITLE							Change	Addition :
NAME	•			3.2 NAME								
STREET ADDRESS	•			3.3 STREE	T ADDRESS							
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP							
TITLE		[	☐ DELETE	4.1 TITLE							Change	☐ Addition
NAME	,			4. 2 NAME								
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CTTY-ST-ZIP				4.4 CITY-S	T-ZIP							
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NAME	•		Į.	5.2 NAME				•		<u>.</u>		
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CITY-ST-ZIP				5.4 CITY-S	îT-Z!P	L				•		□ <b>(</b> ) → (
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NAME				6.2 NAME								ĺ
STREET ADDRESS	and the second of the second				T ADDRESS							
OUTS OF THE SALE				64 CITY-S	T-7IP	į						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of an an attachment with an address, with all other like empowered.

SIGNATURE: