2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000017412

Entity Name: GORT'S CAR WASH, INC.

FILED Jul 20, 2009 Secretary of State

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

6850 SW 8TH ST 6850 SW 8TH STREET MIAMI, FL 33144 US MIAMI, FL 33144 US

Current Mailing Address: New Mailing Address:

6850 SW 8TH ST 6850 SW 8TH STREET MIAMI, FL 33144 US MIAMI, FL 33144 US

FEI Number: 65-0473167 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:

GORT, ZOILA CMS INTERNATIONAL ENTERPRISES, INC. 6850 SW 8TH ST 550 BILTMORE WAY MEZZANINE - 200

MEZZANINE - 200 CORAL GABLES, FL 33134 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: CARLOS M. SAMLUT, CPA 07/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTDS () Delete

Name: GORT, ZOILA

Address: 1809 BRICKELL AVE APT #611

City-St-Zip: MIAMI, FL 33129 US

Title: VP () Delete
Name: GORT. ANA MARIA

Address: 1809 BRICKELL AVE APT #611

City-St-Zip: MIAMI, FL 33129 US

Title: D () Delete Name: PEREZ, LEOPOLDO

Address: 6850 SW 8TH STREET City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition

Name: GORT, CESAR

Address: 6850 SW 8TH STREET City-St-Zip: MIAMI, FL 33144 US

Title: VP (X) Change () Addition

Name: GROSSO, ANA MARIA Address: 6850 SW 8TH STREET City-St-Zip: MIAMI, FL 33144 US

Title: S (X) Change () Addition

Name: GORT, LORENA
Address: 6850 SW 8TH STREET
City-St-Zip: MIAMI, FL 33144 US

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: CESAR GORT DPT 07/20/2009