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

CORPORATION ANNUAL REPORT 1997

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 14 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400062196 (8)

BLUE SPRINGS AUTO WASH, INC.

Principal Place	of Business	Mailing Address	Mailing Address 1310 S. VOLUSIA ORANGE CITY FL 32783-7029			F 163 HATT LED HOLLS GLOCK DOWN DAVIN BOW		11881 FIERS 1817	8 8111 LBB1
1310 S. VOLUS ORANGE CITY I									
						3. Date incorporated or Qualified 08/19/1994	1	te of Last R 30/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Address		,		4. FEI Number		Ap	plied For
21		26	***			59-3264440			t Applicable
Suite, Apt. (	#. etc	Suite, Apt. #, etc.	······································			5. Certificate of Status Desired See Required Fee Required			
City & State	)	City & State	City & State			6. Election Campaign Financing		\$5.00	····
23	,	28				Trust Fund Contribution		Added 1	
Zip	Country	Zψ				8. This corporation has liability for intangible tax under s. 199.032,			
24	25	25 29 30				Florida Statutes Yes No			
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered /	Agent	
lee, ernest				81	Name				
	S. VOLUSIA			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
ORA	NGE CITY FL 32763			83					
				03					
				84	City		FL	<b>85</b> Zip	Code
11 Questiont	to the name one of Sections 607	0502 and £07 1508 Florida Statu	ites the a	baw	e-named co	rporation submits this statement for the p	urpose of	changing if	ts registered
office or ri	egistered agent, or both, in the S	itate of Florida. Such change was	authorize	db۱	the corpora	ation's board of directors. I hereby accept	the app	ointment as	registered
agent Lai	m familiar with, and accept the o	bligations of, Section 607.0505, F	Iorida Sta	tutes	5.				
SIGNATURE	Signature, typical or printed narise of registors	viragest and tile Lapple ab c. (NC	TE Registere	d Age	eni signature req	uired when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	PSTD	DELETE	1.1 1110					Change	Addition
NAME	LEE, ERNEST		12 N	AME					
STREET ADDRESS	919 PINETREE TERRACE		1.3 STREET ADDRESS		ADDRESS				
CITY - ST - ZIP	DELAND FL 32724		1.4 C	ITY - 9	ST-ZIP			T 1 2	
ħπL€		L) DELETE	2.1 TITLE					LI Change	Addition
NAME				2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP		DELETE	2 4 CITY 3.1 TITLE		ST-ZIP	\\		Change	Addition
TITLE		buttu	3.2 N						
NAME STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		☐ DELE1€	41T		v. p.,		<del></del> .	Change	Addition
NAME			4 2 1	NAME					
STREET ADDRESS			4.3 S	TREE	ADDRESS				
CITY - S1 - ZIP			440	iTY-S	ST-ZIP				
TITLE		DELETE	511					☐ Change	☐ Addition
NAME			52 N	AME					
STREET ADDRESS			5.3 \$	TREE	ADDRESS				
CITY - ST - ZIP					ST-ZIP			T 1 4.	[ ]
TITLE		☐ DELETE	61T					Change	Addition
NAME			6.2 N	IAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP	ha postific trust that in the second	volice with this blice does not			ST-ZIP	red in Section 119.07(3)(i), Florida Statute	e I furthe	r certifu that	the
						nat my signature shall have the same leg- port as required by Chapter 607, Florida			