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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000071604 (0)

PALM BAY CAR WASH, INC.

FILED May 16 1997 8:00am Secretary of State



	A 15	Mailing Address		· · · · · · · · · · · · · · · · · · ·				
Principal Place 4800 BABCOCH PALM BAY FL	(STREET N.E.				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
					3. Date incorporated or Qualified 09/29/1994		te of Last R 6/1996	leport
2. Principa' Place of Business 2a. Mailing Address					4. FEI Number		A	pplied For
21		26			59-3263394			ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		++	Additional equired
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for			. 199,032,
24	25 29		30		Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New R	egistered A	igent .	
MILL	ER, JEFFREY C			81 Name				
	BABCOCK STREET N.E.			82 Street A	ddress (P.O. Box Number is Not Accepte	ble)		
PAL	M BAY FL 32905			83		· · · · · · · · · · · · · · · · · · ·		
				84 City			85 Zip	Code
				1 1	orporation submits this statement for the ration's board of directors. I hereby acce	FL	1	
SIGNATURE	,	ND DIRECTORS	13.		quired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND		
TOLE	D	DELETE	1.1 30	LE			Change	Addition
NAME	MILLER, JEFFREY C		1.2 NA					
STREET ADDRESS	1346 NOLAN STREET N.E.		1.3 St	REET ADDRESS				
C-TY-ST-ZIP	PALM BAY FL 32907	T prickr		TY-ST-ZIP			Change	Addition
TITLE	D Miller, Clive H	☐ DEŁETE	2.1 Tr	ì		-	L Change	L Addition
NAME STREET ADDRESS	1346 NOLAN STREET N.E.		2.2 N/	REET ADDRESS				
CITY - ST - ZIP	PALM BAY FL 32907		8	ITY-ST-ZIP				
THUE	D	DELETE	3.1 70		***************************************	··············	Change	Addition
NAME	SZABO, STEPHEN J		3.2 N	1			-	
STREET ADDRESS	2907 AVENUE B		33 SI	REET ADDRESS				
DITY-ST-ZP	HOLMES BEACH FL 34217		3 4. C	ITY-ST-ZIP				
Title		☐ DELETE	4.1 TI	ILE .			Change	Addition
NAME			4. 2 N					
STREET ADDRESS				REET ADDRESS				
City-St ZiP		☐ DELETE		TY-ST-ZIP			Change	Addaina
TILL		☐ htft.it	5.1 Ti				Change	Addition
NAME CALCUIT ADDRESS			5.2 No					
STREET ADDRESS			i i	REET ADDRESS				
CITY - S1 - ZIP TOLE		DELETE	5.4 Cl	TY-ST-ZIP			Change	Addition
NAME			6.2 N	1	1		- CHANGE	1,00,00
STREET ADDRESS				REET ADDRESS				
CITY - ST - ZIP				TY-ST-ZIP		•		
011 31 71	ļ		0.40	1 ((()) - E/I				

14. I do 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 or 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

SIGNATURE:

YPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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