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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075138 (5)

BUDGET MOBILE WASH INC.

FILED
Jan 23 1998 8:00am
Secretary of State



Dringing Plan	o of Pusinger	Mailing Address	····						
Principal Place of Business 2980 O'BANNION TERRACE DELTONA FL 32738		•							
			2980 O'BANNION TERRACE						
		DELTONA FL 32738				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						10/10/1994			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-3239830	-	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apl. #, etc.				CO 75 (3.88)			
22		27				5. Certificate of Status Desired		Required	
City & Stat	e	City & State				6. Election Campaign Financing	\$5.0	0 May Be	
23	28					Trust Fund Contribution		d to Fees	
Zip	Country	Zip	Cor	intry		8. This corporation owes or has paid the curr	ront vear	Intangible	
24	25	29	30			Personal Property Tax due June 30.	Yes	□No	
	g. Name and Address of Curren	t Registered Agent		I		10. Name and Address of New Registered	Agent		
BROWN, DOUGLAS H				81	Name		"		
	O O'BANNION TERRACE			82	Chool A	ddress (P.O. Box Number is Not Acceptable)			
l	LTONA FL 32738			02	Street A	Address (P.O. Box Number is Not Acceptable)			
J				83					
				84	City	FL	85 Zij	p Code	
11. Pursuant	to the provisions of Sections 607 050.	2 and 607.1508, Florida Statu	tes, the a	bovo	-named c	corporation submits this statement for the purpose of	changing	its registered	
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was	authorize	d by	the corpo	oration's board of directors. I hereby accept the app	ointment a	as registered	
•	in terminal with, and accept the obliga	ations of, occiton our loses, in	iorida orai	iuico					
SIGNATURE	Stoneture, typed or printed name of registered age	nt and title d applicable (NO	If Registere	d Ager	nt signature re	equired when reinstating) DATE			
12.	OFFICERS AND	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	
TITLE	P	DELETE	1.1 TI	1.1 TITLE			☐ Change	Addition	
NAME	Brown, Douglas H		1.2 NAM						
STREET ADDRESS	ss 2980 O'BANNION TERRACE 1.3		1.3 \$1	1.3 STREET ADDRESS					
CITY-ST-ZIP	DELTONA FL 32738			1.4 CITY - S1 - ZIP					
TITLE	S	DELETE	2.1 TI				☐ Change	Addition	
NAME	BROWN, LINDA L		2.2 N/	AME	}		•		
STREET ADORESS	COAC CIDALWING TERRACT			23 STHEET ADDRESS					
CITY-ST-ZIP	OFFITALIA FL GOTOS			2. 4 C/TY-ST-ZIP					
TITLE				3.1 TITLE			Change	Addition	
NAME			ľ	3.2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE				3.4. CITY-ST-7IP 4.1 THLE			☐ Change	Addition	
NAME			4.2 N						
					ADDODECC				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				IY-SI	- ZII'		Change	Addition	
TITLE			5.1 70		- [— Mange	Addition	
NAME			5.2 N/						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5 4 Cl		-ZIP		0	, and	
TITLE		☐ DETEJE	611/			5000024110 -01/26/980101000	rynange Tarynange	Addition	
NAME			6.2 NA			-01/26/980101000	34	\sim \sim \sim	
STREET ADDRESS			6.3 ST	REFT	ADDRESS	***150,00		-id5 1	
0.707 07 310			0.40	T	aun l			71 -	

14. Thereby 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 offect as if made under eath, that 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 if changed, or on an attachment with an address.