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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

STREET ADDRESS

P95000005458 (1)

SOAPY SUDS, INC.

Mailing Address Principal Place of Business 832 NO. FEDERAL HIGHWAY 832 NO. FEDERAL HIGHWAY POMPANO FL 33062 POMPANO FL 33062 3a. Date of Last Report 3. Date Incorporated or Qualified 01/20/1995 Applied For FEI Number 2. Principal Place of Business Mailing Address 2a. Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State \Box Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s 199.032, Florida Statutes
 Yes ☐ No Country Zip Country Zip 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) FEINBERG, JEFFREY 82 4651 SHERIDAN STREET STE. 300 83 HOLLYWOOD FL 33021 Zip Code R4 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. D. u. f VOID **=** avoll! ngistered Agent signature required when reinstating) SIGNATURE Signature, typed or printed name of registered agent and title if ag ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE TITLE FREY, DONALD 1.2 NAME 11th AVE, APT. 201 NAME 20125 NW 9TH COURT 1.3 STREET ADDRESS STREET ADDRESS BEACH, FL. 33060 Pom PANO PEMBROKE PINES FL 33029 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3. 1 TITLE TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY - ST - ZIP C(1) - ST - 2(P) Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIF Addition Change DELETE 6 1 THLE THLE 62 NAME NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 if changed, or on an attachment with an address. 3 - 20 - 96 (954) 786-8437
Dayting Phone •

6.3 STREET ADDRESS

64 CITY-ST-ZIP

CR2E034 (12/95)