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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # P95000082132 (8)**

TAMPA CAR WASH PROPERTIES, INC.

Principal Place of Business Mailing Address					E EDUKANCI DIF HORRI BIKAF BOAKI BUKAI BUKAI AURAU HORRI HORRI KANDA KANDA KANDA KANDA KANDA KANDA KANDA KANDA			
BUITE 480			2002 N LOIS AVE SUITE 460 TAMPA FL 33607-2366	SUITE 460				
						3. Date Incorporated or Qualified 10/25/1995	3a. Date of Last Report 04/16/1996	
2. Principal Place of Business			2a. Mailing Address	2a. Mailing Address		4. FEI Number		pplied For
21		26		59-3339944		ot Applicable		
Sulte, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired	
	/ & State	City & State			6. Election Campaign Financing		May Be	
23			28			Trust Fund Contribution Added to Fees		
Zip	Country		Zip	<del></del>		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 9. Name and Address of Current		29			Florida Statutes Yes No  10. Name and Address of New Registered Agent		
			it Hegistered Agent		31 Name	10, Name and Address of New F	egistered Agent	
MAUSE, INUMAS S								
SUITE 480					Street Addr	ress (P.O. Box Number is Not Accept.	RE RD	
JAMPA FL 83607					33			·
				-	34 City		ge Zin	Codo
					1 TA.	m PA		3609
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purp								
agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNA	TURE	<u></u>		DATE D	Agent signature requir		DATE	
12.	Signature, typed or	printed name of registered ago OFFICERS AN	D DIRECTORS	13.	Agent signature requir	ADDITIONS/CHANGES TO OFF		R\$ IN 12
TITLE	1 0		DELETE	1.1 TITL	f		☐ Change	Addition
NAME				1.2 NAME				
STREET A	TREET ADDRESS 4301 WOODMERE RD			1.3 STREET ADDRESS				
CITY-ST		•			/-ST-ZIP			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE	D	D DAVISOND A	DELETE	2.1 7(1)			Change	Addition
NAME				2.2 NAME				
}	REET ADDRESS   13711 WHITEBARK PL Y-ST-ZIP   TAMPA FL 33625			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP				
TITLE	D D	. 00020	DELETE	3.1 7/71			Change	Addition
NAME	CURCI, FF	RANCIS M		3.2 NAA	AE .			
	STREET ADDRESS 1019 GUISANDO DE AVILA			3.3 STR	EE1 ADDRESS			
CITY-ST	-ZIP TAMPA FL	. 33613		3.4. CIT	Y - ST - ZIP			
TITLE	D	N DIOV 4	☐ DELETE	4.1 TITL			☐ Change	L_ Addition
NAME	ANDERSO	N, RICK A		4. 2 NA				
STREET	1 655664	E CYPRESS DR			EFT ADDRESS			
CITY ST	-ZIP ODESSA I	L 00000	DELETE	5.1 TITL	Y-ST-21P .E		Change	☐ Addition
NAME				5.2 NAM				_
STREET A	ADDRESS			5.3 S1R	EFT ADDRESS			
CITY-ST				5.4 CiT	Y-ST-ZIP			
TITLE			☐ DELETE	6.1 TITE	ŧ		Change	Addition
NAME				6.2 NAN	ME .			
STREET A	<b>N</b> DDRESS				TEL AUDRESS			
CITY-ST	to haraby partify that t	the information equation	d with this filing door not aug	alify for the c	Y-ST-ZIP Exemption states	d in Section 119 07/3/(i) Florida Statu	tes. I further certify the	t the
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 if changed, or on an attachment with an address.								