## 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 # P95000085021 (0)

TJB AUTO WASH, INC.

Principal Place of Business		Mailing Address				L SEAFING OF AND A SERIE OF SERIES O	# U		AL DIES SERI
8211 W. HILLSBOROUGH AVE. TAMPA FL 33511 US		2306 W. KENNEDY BLVD. TAMPA FL 33609 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
						11/02/1995			
	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	oplied For
21						59-3344584			ot Applicable
Sulte, Apl. #, etc.		Suite, Apt #, etc.	·			5. Certificate of Status Desired			Additional
22		27 Suite 375						_,	paninpe
City & State	<del>)</del>	City & State	<u> </u>			6. Election Campaign Financing			May Be
Zip Country		28 Tampa, FL	Zaj ratiipa, ri. Zip Cour			Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible			
24	25	<u>⊢</u> ¬	30	500. ki j		Personal Property Tax due June 30		_	angibie ∃No
24	25 29 33609 30 S. Name and Address of Current Registered Agent					10. Name and Address of New Registered A			
					Name				
DIRCKS, TOMMI G 6105 MEMORIAL HIGHWAY				82	Ctenes Add	drago (D.O. Day Number in Net Assessable			
SUITE C				82	Street Add	dress (P.O. Box Number is Not Acceptable	)		ţ
	MPA FL 33615			83					
174	m 7,12 00010		-	-				T 7:-	01-
				84	City		FL 85	Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abo						rporation submits this statement for the pur	pose of char	nging it	s registered
office or r	<b>egistered</b> agent, or both, in the State <b>m fami</b> liar with, and accept the oblig	eof Florida. Such change was ations of, Section 607.0505. I	s authorized Florida Stati	i by ules.	the corpora	ation's board of directors. I hereby accept	the appointm	ent as	registered
SIGNATURE									Ì
SIGNATURE	Signature, typed or printed narrie of registered ag-	ent and title if applicable. (No	OTE Registered	Ager	nt signature req	uired when reins(ating)	DATE		
12.	<del></del>	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	•		1.1 Tit	1.1 TITLE			□ (	Change	Addition
NAME	BROWN, THOMAS J		1.2 NA						
STREET ADDRESS	4427 W. KENNEDY BLVD., #	375	1.3 STREET ADDRESS						
CITY-ST-ZIP	TAMPA FL	DELETE	1.4 CITY+ST-ZI		r-ZIP	·			T sadition
TITLE	-			2.1 TITLE 2.2 NAME			Ц	Change	Addition
NAME	BROWN, THOMAS J								
STREET ADDRESS 4427 W. KENNEDY BLVD, STE 375			- 1		ADDRESS				
CITY-ST-ZIP TITLE	TAMPA FL 33609	DELETE	2.4 C		1 - ZIP		<u> </u>	hange	Addition
NAME	<del>-</del>			3.1 TITLE 3.2 NAME			٠ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ	mango	
	tradition of the			3.3 STREET ADDRESS					
STREET ADDRESS	TAMPA FL			3.4 CITY-ST-ZIP					
CITY-ST-ZIP	S DELETE			A 1 TITLE			П	hange	X Addition
NAME	Wolfe, Kathleen R			5			, .	- 0-	
STREET ADDRESS	2306 W KENNEDY			4 2 CTREET ADDRESS		ORCHARD, MARCY			
CITY-ST-ZIP	TAMPA FL			44 CITY CT 710		427 W. KENNEDY BLVD.,	STE. 37	<b>'</b> 5	
TITLE			5 1 TIX			AMPA, FL 33609		hange	Addition
NAME		_	52 NA					-	
STREET ADDRESS			4		ADDRESS				l
CITY-ST-ZIP			5.4 CI						
TITLE		☐ DELETE	6.1 111					hange	Addition
NAME .			6.2 NA	ME					ļ
OTOPPE ADOPPES			0.007	DECT (	1DDDCCC				

14. I 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 of 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.

**FILED** 

Apr 22 1998 8:00am

Secretary of State