

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

CORPORATION

~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 AUG 22 PM 1:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

100008024791--8

-09/25/02--01081--009

\*\*\*\*927.00 \*\*\*\*309.00

DOCUMENT # **P95000085021**

1. Corporation Name

TJB AUTO WASH  
INC

P ~~95000085021~~

✱

2001-2002 UBR

2. Principal Office Address

8211 W. Hillsborough Ave

3. Mailing Office Address

4105 Memorial Hwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite C

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33511

Country

US

Zip

33415

Country

US

4. Date Incorporated or Qualified  
To Do Business in Florida

11/02/95

5. FEI Number

593344584

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Thomas J Brown

Street Address (P.O. Box Number is Not Acceptable)

4105 Memorial Hwy

Suite, Apt. #, Etc.

Suite C

City

TAMPA, FL

State

FL

Zip Code

33415

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*[Signature]*

Date

8/21/02

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres Sec	Thomas J Brown	4105 Memorial Hwy # C	TAMPA FL 33415

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]*

Date

8/21/02

Daytime Phone #

813  
2459482

CR2E081 (9/01)

282

August 21, 2002

Ms. Cathy Ashton  
409 East Gaines  
Corporate Reinstatement Division  
Tallahassee, FL 32399

RE: WTW, Inc.  
WTW II, Inc.  
TJB Auto Wash, Inc.

Dear Ms. Ashton:

The above-referenced corporations were rendered inactive because the Annual Report was mailed to an old address, after being changed with your office in 2000. Consequently, we did not receive the notice and filing fees were not paid.

Please find enclosed the properly completed Corporation Reinstatement forms and appropriate filing fees for all three corporations.

Thank you for your attention to this matter.

Sincerely,



THOMAS J. BROWN

TJB/phb

Enclosures:

Corporation Reinstatement (3)  
Filing Fees (3)

Thank you  
So much!!