

09161999-90010-020-S550.00-S550.00

1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000095935

1. Corporation Name

A & J CAR WASH, INC.

Principal Place of Business

847 SOUTHERN BLVD
WEST PALM BEACH FL 33405

Mailing Address

847 SOUTHERN BLVD.
WEST PALM BEACH FL 33405

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1995

4. FEI Number

65-0627211

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation owes the current year
Intangible Personal Property.☐Yes ☐ No

9. Name and Address of Current Registered Agent

SOTILLO, MAURICE
5801 SOUTH DIXIE HIGHWAY STE B
WEST PALM BEACH FL 33405

10. Name and Address of New Registered Agent

81 Name **Jorge L. Panque P.A.**
82 Street Address (P.O. Box Number is not acceptable)
847 Southern Blvd
83 **W P B FL** **33405**
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1506, 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.

SIGNATURE

Signature of registered agent (if not a registered agent, delete this line)

(NOTE: Registered Agent signature required when reinstating)

DATE

9/8/99

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	FERNANDEZ, ANGEL	
STREET ADDRESS	1832 17TH AVENUE NORTH	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	D	☐ DELETE
NAME	FERNANDEZ, HILDA	
STREET ADDRESS	1832 17TH AVENUE NORTH	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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 to this report.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/8/99 (91) 655-7707

0076772

CR2E034 (5/99)