FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Aug 19 1997 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 P96000040358 (9) DQCUMENT # MACWASH, INC. Principal Place of Business Mailing Address Same 7300 - 14 Street NE **AMENDED REPORT** St. Petersburg, FL 33702-4635 3. Date Incorporated or Qualified 3a. Date of Last Report 05/10/1996 2. Principal Place of Business 2a. Mailing Address 4. EEI Number Applied For 59-3384933 21 26 Not Applicable Suite, Apl. #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Melanie Slaght SLAGHT, WILLIAM W. Street Address (P.O. Box Number is Not Acceptable) 7300 - 14 Street NE 7300 - 14 Street NE St. Petersburg, FL 33702-4635 83 City **St.** 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 84 SIGNATURE (NOTE_Trug stored Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 X) DELETE 1.1 THLE X Change Addition TITLE Melanie Slaght SLAGHT, WILLIAM W. 1.2 NAME NAME 7300 - 14 St NE 7300 - 14 St NE STREET ADDRESS 1.3 STREET ADDRESS St. Petersburg, FL 33702-4635 St. Petersburg FL 33702-4635 CITY - ST - ZIP 1.4 CITY+ST-ZIP DELETE Change Addition 2111111 TITLE 2 2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-7IP CITY-ST-ZIP DELETE TITLE 3 1 TITLE Change ☐ Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP 3.4. CHY-\$1-7(P) DELETE Change ___ Add tion 4111111 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4.0:1Y-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 8.19

CITY-ST-ZIP ###61_25

14. I do horeby 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

54 CITY-ST-7IP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

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6-2-97 813-892-1237

☐ Change

Addition