

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

FILED

Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000059644 (0)

1. Corporation Name

AUTO & MARINE DETAILING SYSTEMS, INC.



Principal Place of Business

3501 N. ANDREWS AVENUE  
FORT LAUDERDALE FL 33309

Mailing Address

3501 N. ANDREWS AVENUE  
FORT LAUDERDALE FL 33309-5219

2. Principal Place of Business

21 4402 NE 11 AVE

Suite, Apt. #, etc.

22 City & State

23 FT. LAUDERDALE FL

24 33334

Country

25 USA

2a. Mailing Address

26 4402 NE 11 AVE

Suite, Apt. #, etc.

27 City & State

28 FT. LAUDERDALE, FL

29 33334

Country

30 USA

3. Date Incorporated or Qualified

07/17/1996

3a. Date of Last Report

NA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

GRIFFIN, JEFFREY C  
3501 N. ANDREWS AVENUE  
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name GRIFFIN, JEFFREY C.

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

4402 NE 11 AVE

83

84

FT. LAUDERDALE

FL

85 Zip Code

33334

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SANDERSON, PATRICIA L  
STREET ADDRESS 3501 N. ANDREWS AVENUE  
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 JEFFREY C. GRIFFIN

1.3 STREET ADDRESS 4402 NE 11 AVE

1.4 CITY-ST-ZIP FT. LAUD, FL. 33334

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME D/S. PATRICIA SANDERSON

2.3 STREET ADDRESS 4402 NE 11 AVE

2.4 CITY-ST-ZIP FT. LAUDERDALE FL. 33334

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 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.

SIGNATURE Patricia Sanderson

4/25/97 (07)351077

CR2E034 (9/96)