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

FILED Apr 07 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P96000085118 (3) VILLAGE WASH OF MARGATE, INC. Mailing Address Principal Place of Business 1438 NORTH STATE ROAD 7 1438 NORTH STATE ROAD 7 MARGATE FL 33063-2847 MARGATE FL 33063 3. Date Incorporated or Qualified 3a. Date of Last Report 10/11/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees **Trust Fund Contribution** 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name WEINSTEIN, MURRAY 1438 NORTH STATE ROAD 7 Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063 83 64 Zip Code City 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: type of de printed has no of registered agent and title if applicable (NOTE: Registered Agent signature regulred when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 96/6) DELETE Change TIELE 1.1 TITLE WEINSTEIN, MURRAY 1.2 NAME NAME 1438 NORTH STATE ROAD 7 STREET ACCRESS 1.3 STREET ADDRESS MARGATE FL 33063 1.4 CITY - ST - ZIP CHY-ST-ZiP DELETE Change Addition TI'U 2.1 TITLE NAMI 2.2 NAMI 2.3 STREET ADDRESS STREET ADDRESS 2.4 City - St - ZIP CHY: Si-7IP L Addition DELETE ☐ Change 3.1 TITLE TiftE 3 2 NAME MW: 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 4.1 TITLE TIFLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ACIONESS 44 CITY - ST - ZIP C01Y - \$1 - 2d DELETE Channe Addition 11111 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS SUCH LADORESS 5.4 CITY - ST - ZIP CHY-ST 70 DELETE Change Addition 6.1 TITLE 160

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.

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

NAME

STREET ADDRESS