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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000096538 (9)

MAGIC	WASH, INC.				1 32 6 (10 6 1 1) 1 1 2 1 (10 1 6 1 (1) 1 6 2 (1) 1 6 2 (1) 1 6 2 (1) 1 6 2 (1) 1 6 2 (1) 1 6 2 (1) 1 6 2 (1)	(0 0)(0) 0)(0) 0)(0) 0)(0) 0)(0)
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Principal Place of Business		Mailing Address		I Instituti ila iailia aliii aliii anii anii anii	if firit firit tribi inie inn	
C/O KAYE & ROGER, P.A.		C/O KAYE & ROGER, P.A.				
5607 N.W. 38TH AVE. BOCA RATON FL 33496		5607 N.W. 38TH AVE. BOCA RATON FL 33496		DO NOT WRITE IN THIS	SPACE	
000000000000000000000000000000000000000					3. Date Incorporated or Qualified	
					11/26/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-674338	Applied For	
21		26		APPLIED FOR	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			Fee Regulred	
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	v	8. This corporation owes or has paid the cu	
24	25	⊢	30	,	1 '	Yes No
	g, Name and Address of Currer		1		10. Name and Address of New Registered	
KA	Y & ROGER, P.A.		81	Name		
6261 N.W. 6TH WAY			82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 103				oli cot / tadi	ess (Fig. Son Hamber to Herr tocopiable)	
FOI	RT LAUDERDALE FL 33309		83			
			84	City		85 Zip Code
				J	FL	<u> </u>
office or re	egi s tered agent, or both, in the State	e of Florida. Such change was au	ithorized b	v the corporati	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	ar changing its registered pointment as registered
agent. Fai	m familiar with, and accept the oblig	jations of, Section 607.0505, Flori	ida Statute	is.		·
SIGNATURE	Signature, typed or printed name of registered ag-	and and fills it controlled. (NOTC)	Danisters d Ar	oot sinnet is social	ed when reinstating) DATE	
12.		ID DIRECTORS	13.	lavit siğitatora radom	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	ALLEN, BARBARA 12		1.2 NAME			
STREET ADDRESS			1.3 STREE	T ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496		1.4 CITY-	ST-ZIP		
TITLE	D	DELETE 2.1 T				☐ Change ☐ Addition
Name	The state of the s		2.2 NAME			
STREET ADDRESS	5607 N.W. 38TH AVE.		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496		2. 4 CITY-	ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE	İ		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP		Druget.	3.4. CITY-	ST-2IP	 	T Observe T Addition
TITLE		☐ DELE te	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE	ST-ZIP		Change Addition
TITLE		E DECETE	5.1 TITLE 5.2 NAME			Change Radiilon
NAME STREET ADDRESS						
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE	-	☐ DELE TE	5.4 CITY - 6.1 TITLE	OI-FIF		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		

6.4 CITY-ST-ZIP 14. Thereby 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 supplied multiple 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 attainment with an address.

FILED

Feb 23 1998 8:00am

Secretary of State