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

PROFIT CORPORATION ANNUAL REPORT 1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700063921 (5)

SUNSH	IINE BOB'S AUTO DETAIL	ING, INC.		A 1881/1881 (1)8 (8)((1)881/1881/1881/1881/18	AAIJA DIJAA IJAD IDIJA (IDA) AIGI JAGI
1					
Principal Plac	e of Business	Mailing Address	•	A TABUNDER HIT FREIN CORNE MAINE MAINE	89118 81188 11119 18118 11881 1181 1881
699 NW 1ST AVE. 699 NW 1ST AVE. BOCA RATON FL 33432 BOCA RATON FL 33432				DO NOT WRITE I	N THIS SPACE
				3. Date incorporated or Qualified	T THO OF NOE
				07/23/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0769743	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	-	27			Fee Required
City & State		City & State	-	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Z(p	Country 30	This corporation owes or has paid     Personal Property Tax due June 38	<b>—</b> · — ·
	9. Name and Address of Curre		1001	10. Name and Address of New Regis	
CO	PRPORATION SERVICE COMPA	NY			
1201 HAYS STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable	)
TAI	LLAHASSEE FL 32301-2525		83	<del></del>	<u> </u>
l .			<b>84</b> City		85 Zip Code
					FL
office or r agent. • a SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typod or printed name of registered as		authorized by the corporal lorida Statutes.  TE: Registered Agent signature requirements.	poration submits this statement for the pur tion's board of directors. I hereby accept i	the appointment as registered
12,	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	WEISENTHAL, ROBERT		1.2 NAME		
STREET ADORESS	699 NW 1ST AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432	DELETE	1.4 CITY-ST-ZIP		[] A [] 4289
TITLE	D MEIDENTHAL OTACV	TT SETTIE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	WEISENTHAL, STACY 699 NW 1ST AVE.		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		2.4 CITY-ST-ZIP		
TITLE	BOOK TIKTON TE 83432	DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-S1-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
1 11100			■ Q.J IJIEC		C creating C Audit((0))

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 soll plemental annual report of solling the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee expowered 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 attach tent with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP