2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State
04-24-2003 90259 009 ***150.00

DOCUMENT # P97000092106

1. Entity Name
CRUISIN' AUTO DETAILING, INC.

Principal Place of Business	Mailing Address
~~8568 OSTRUM WAY~~	~~PO BOX 6604~~
~~WEEKI WACHEE FL 34613~~	~~SPRING HILL FL 34611~~

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
8027 Folkstone St	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Weeki Wachee, FL	City & State
Zip: 34613 Country: USA	Zip Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SNAKENBERG, LARRY A	Name
~~12421 SNOWY EGRET AVE~~ 8027 Folkstone St.	Street Address (P.O. Box Number is Not Acceptable)
~~WEEKIWACHEE FL 34614~~ Weeki Wachee, FL 34613	Change address
	City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SNAKENBERG, LARRY A	NAME	
STREET ADDRESS	~~12421 SNOWY EGRET AVE~~ 8027 Folkstone St	STREET ADDRESS	Change address
CITY-ST-ZIP	~~WEEKIWACHEE FL 34614~~ Weeki Wachee FL 34613	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SNAKENBERG, MARILYN J	NAME	
STREET ADDRESS	~~12421 SNOWY EGRET AVE~~ 8027 Folkstone St	STREET ADDRESS	Change address
CITY-ST-ZIP	~~WEEKIWACHEE FL 34614~~ Weeki Wachee FL 34613	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~~SIGNATURE REQUIRED~~ Marilyn Snakenberg 3/20/03 352-597-4469
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)