Apr 18, 2002 8:00 am Secretary of State

04-18-2002 90439 031 ***150.00

2002 Uniform Business Report (UBR)

P97000096577

DOCUMENT # 1. Entity Name

BRANDON CAR WASH, INC.

Principal Place of Business

% MANAGING FOOD, LLC 1326 E. LUMSDEN RD.

BRANDON FL 33511

City & State

Mailing Address

% MANAGING FOOD, LLC 1326 E. LUMSDEN RD. BRANDON FL 33511

2. Principal Place of Business 328 W. Branden EN

3. Mailing Address

City & State

Suite, Apt. #, etc.

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3485532

5: Certificate of Status Desired - -

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

CURRY, CLIFTON C JR. 750 W. LUMSDEN ROAD **BRANDON FL 33511**

7. Name and Address of New Registered Agent

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

City

(NOTE: Registered Agent signature required when reinstating)

Zip Code FL

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.

SIGNATURE

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

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

(See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE CR2E034 (9/01) ☐ Delete TITLE [7] Addition NAME KAZBOUR, TALAL NAME Lumsden R 2503 HWY 60E STREET ADDRESS STREET ADORESS CITY-ST-ZIP VALRICO FL 33594 CITY-ST-ZIP TITLE ☐ Delete NAME Kazbour, Tarek NAME STREET ADDRESS 2503 HWY 60 EAST STREET ADDRESS CITY-ST-7IP Valrico FL 33594 CITY-ST-ZIP TITLE Delete TITLE Addition KAZBOUR, ZIAD NAME NAME STREET ADDRESS 2503 HWY 60 E STREET ADDRESS CITY-ST-ZIP VALRICO FL 33594 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

CITY-ST-ZIP

SIGNATURE: