

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 25, 2002 8:00 am**  
**Secretary of State**

07-25-2002 90120 047 \*\*\*150.00

**DOCUMENT # P98000003228**

1. Entity Name

**TROPICAL SPLASH CAR WASH, INC.**

Principal Place of Business

**5595 N. WICKHAM ROAD  
 MELBOURNE FL 32940**

Mailing Address

**5595 N. WICKHAM ROAD  
 MELBOURNE FL 32940**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3489746**

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

**ARTEAGA, WENDY J  
 5595 N. WICKHAM ROAD  
 MELBOURNE FL 32940**

Name

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

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☐

**FILE NOW!!! FEE IS \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PSD  
 ARTEAGA, WENDY J  
 5595 N. WICKHAM ROAD  
 MELBOURNE FL 32940**

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**TD  
 ARTEAGA, DAVID  
 5595 N. WICKHAM ROAD  
 MELBOURNE FL 32940**

☐ Delete

TITLE  
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 STREET ADDRESS  
 CITY-ST-ZIP  
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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.

SIGNATURE:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Wendy J. Arteaga 7-2202 (321) 253-6050**

Date

Daytime Phone #

CR2E034 (4/02)



*Attachment*  
# P98 000003228  
122754  
**TROPICAL SPLASH**

**Car Wash & Cafe**



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Department of State  
Uniform Business Report  
Re: Tropical Splash Car Wash, Inc.  
Document # P98000003228  
FEIN 59-3489746

I am submitting my report and fee. I am paying \$150.00 as this is my first notice. I have been in business for nearly four years. Last year I called my attorney to ask why I had not received these notices. They had filed the wrong address. Last year I paid all appropriate fees and the correct address was given to your department. Yet, apparently, I am still not receiving the notice on time as this notice was my first. What do I need to do so that I am correctly and timely notified in your system?

Sincerely,

*Wendy J. Arteaga*

Wendy J. Arteaga  
President,  
Tropical Splash Car Wash

7-23-02

5595 North Wickham Road Melbourne, FL 32940  
(407) 253-6050