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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 1. Corporation Name

Suite, Apt. #, etc.



FLORIDA DEPARTMENT, OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90196 023 ***150.00



| HICK WASH, INC. | | | | | |
|---|----------------------------------|-----------|--|---------------------|--|
| Principal Place of Business | Mailing Address | · · · · | I (804 Siles) sitti (8818 diis) latta diii dii | in 61211 bion 61411 | |
| 2640 N. 60 AVE. HOLLYWOOD FL 33021 US | 784 NE 70TH ST MIAMI FL 33138 | Section 1 | DO NOT-WRITE IN THIS SPACE | | |
| | 4 | • | 3. Date Incorporated or Qualifed 08/10/1992 | | |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Ap | |
| 1 700 NF 70 Cha | 1 2 | | 65-0307220 | □ No | |

Suite, Apt. #, etc.

| | 27 | | | | | Fee | Required |
|---------------------|-----------------------------|----|------|---------------|---|-----------|------------------------------|
| w & State Fla | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | | 0 May Be d to Fees |
| 33138 Country | Zip 29 | 30 | ntry | | This corporation owes the current year Personal Property Tax. | ☐ Yes | □No |
| 9. Name and Address | of Current Registered Agent | | Γ | | 10. Name and Address of New Registe | red Agent | ·——- |
| JOSE R. ROCHA | | - | 81 | Name | | | |
| 784 NE 70 ST. | | | | Street Addres | eet Address (P.O. Box Number is Not Acceptable) | | |
| MIAMI FL 33138 | | | 83 | | | | |

84 City

| office or r | egistered agent or both in the | 507.0502 and 607.1508, Florida Statutes, State of Florida. Such change was auth publigations of, Section 607.0505, Florida | onzed by the corporati | poration submits this statement for the purpose ion's board of directors. I hereby accept the ap | of changing its pointment as reg | registered pistered |
|----------------|---|--|----------------------------------|--|----------------------------------|------------------------|
| | | 1 50x K | Pocha | 4/2 | 0197 | |
| SIGNATURE | Signature, typed of printed flarms of regis | fered agent and title if applicable. (NOTE: Re | gistered Agent signature require | | | |
| 12. | OFFICE | RS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | PSD | ☐ OELETE | 1.1 TITLE | | Change | Addition |
| NAME | ROCHA, JOSE R | | 1.2 NAME | | | |
| STREET ADDRESS | 784 NE 70 ST | <u> </u> | 1.3 STREET ADDRESS | | 220 | 96 |
| CITY-ST-ZIP | MIAMI FL | | 1,4 CITY-ST-ZIP | | 3513 | 50 |
| TITLE | | ☐ DELETE | 2.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | 1 |
| CITY-ST-ZIP | · | | 2.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 3.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | | | 3.2 NAME | | • | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | | |
| mre. | | 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 | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | Change | ☐ Addition |
| NAME | , | | 6.2 NAME | | • | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | ' |
| | | j | CACITY OF 7ID | | | |

CITY-ST-ZIP

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 supplemental 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 attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE:

305-757-0149

_ **=** iii :

Applied For Not Applicable

\$8.75 Additional

85 Zip Code