

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 248696

1. Entity Name

CARFEL, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90089 002 ***150.00

Principal Place of Business

6900 NW 77 CT
MIAMI FL 33166
US

Mailing Address

6900 NW 77 CT
MIAMI FL 33166-9424
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0932103

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FELDENKREIS, GEORGE
3000 N W 107TH AVENUE
MIAMI FL 33172

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.

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 \$150.00
After MAY 1, 2000 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**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	D	FELDENKREIS, OSCAR	13205 BISCAYNE ISLAND N. MIAMI FL				
	PD	FELDENKREIS, GEORGE	3000 N W 107TH AVENUE MIAMI FL 33172				
	STD	HANONO, FANNY	1805 N.E. 198 TERRACE N. MIAMI BCH FL				
	VP	HANONO, SALOMON	1805 NE 198TH TERRACE N MIAMI BEACH FL				
	VP	MICHAEL HALSTON	1160 DANBURY AVE DAVIE, FLA. 33315				

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

FANNY HANONO

V.P.

1/10/2000

305-592-2760

Date

Daytime Phone #

CR2F034 (9/99)