


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2004 8:00 am
Secretary of State

04-26-2004 91290 041 ***150.00

DOCUMENT # P02000055168

1. Entity Name
CARSA, INC.



Principal Place of Business
**1000 ISLAND BLVD., UNIT 1010
 AVENTURA, FL 33160**

Mailing Address
**343 ALCAZAR AVE
 MIAMI, FL 33134**

66430378



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
1000 ISLAND BLVD
 Suite, Apt. #, etc.
1010

07092004 Chg-P CR2E034 (10/03)

City & State
AVENTURA, FL

Zip
33160

Country
USA

4. FEI Number
26-0090619

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SERBER, DANIEL J ESQ.
 TURNBERRY PLAZA, SUITE 801
 2875 N.E. 191ST STREET
 AVENTURA, FL 33180**

7. Name and Address of New Registered Agent


Name
FRIDA CARRILLO

Street Address (P.O. Box Number is Not Acceptable)
1000 ISLAND BLVD

APT. 1010

City
AVENTURA FL Zip Code
33160

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  DATE **7/11/04**

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

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESQUENAZI, HASKIYA C <input type="checkbox"/> Delete 1000 ISLAND BLVD., UNIT 1010 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASSAB DE CARRILLO, FRIDA <input type="checkbox"/> Delete 1000 ISLAND BLVD., UNIT 1010 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARRILLO, CASSAB, LAZARO <input type="checkbox"/> Delete 1000 ISLAND BLVD., UNIT 1010 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete



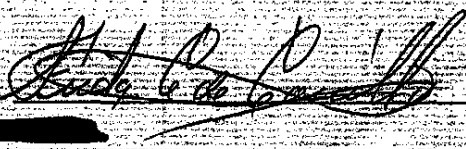

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowers.

SIGNATURE:  DATE **7/11/04** DAYTIME PHONE # **305 4666246**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment
66430378

HASKIYA CARRILLO		1-039
FRIDA CARRILLO		
2500 PARKVIEW DRIVE		
APT. 605		
HALLANDALE, FL 33009		DATE <u>April 12, 2004</u> 68-039/670
PAY TO THE ORDER OF	<u>Florida Dist of State</u>	\$ <u>150.00</u>
<u>One Hundred fifty 00/100</u>		DOLLARS 
HSBC 		
HSBC Bank USA, Aventure, FL 33180		
FOR	<u>02000025768</u>	
		

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