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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT, OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000016709 (4)

CARFEEL PROPS, INC.

Mailing Address	}
5220 N.W. 72ND AVE., UNIT 25 MIAMI FL 33166	
	-
28. Mailing Address	
	5220 N.W. 72ND AVE., UNIT 25 MIAMI FL 33168

FILED May 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 02/24/1995 FEI Number Applied For 65-0580273 Not Applicable Sulte, Apt. #, etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 25 29 Personal Property Tax due June 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GARCIA, PRISCILLA STEPHEN J.KOLSKI, 5220 NW 72ND AVE 82 UNIT #25 CATLIN, SAXON, TUTTLE AND EVANS. 83 **MIAMI FL 33166** 69 EAST FLAGLER STREET City MIAMI 84 Zip Code 33131 M. Pursuant to the provisions of Sections 607.0502 and 607.1508. Horida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the abbigation of Section 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1,1 TITLE TITE F DE FLORIO, MARIA C NAME 1.2 NAME 5220 N.W. 72ND AVE., UNIT 25 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33166** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE DE PIOVESAN, MARIA T 2.2 NAME NAME 5220 N.W. 72ND AVE., UNIT 25 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33166 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 31 TILLE TITLE **DE HIDALGO, ROSANA V** NAME 3.2 NAME 5220 N.W. 72ND AVE., UNIT 25 STREET ADDRESS 3,3 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 3.4. CITY - ST - 7IP DELETE Change X Addition TITLE 4.1 1 ITLE NAME JACQUELINE BRUBAKER STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C/TY - ST - ZIP DELETE Change Addition TITLE 6.1 THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP

14. Thereby 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, own an attachment with an address.

5/21/98