

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

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Morham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

97 JUN 23 AM 8:35

SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

**DOCUMENT # P96000050655 (5)**

1. Corporation Name  
**CARNOTEL 407561, INC.**



Principal Place of Business  
**230 WESTWARD DRIVE MIAMI SPRINGS FL 33166**

Mailing Address  
**230 WESTWARD DRIVE MIAMI SPRINGS FL 33166-5260**

3. Date Incorporated or Qualified **06/12/1996** 3a. Date of Last Report

4. FEI Number Applied For  Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**SILVERIO, MARK V  
 44 W. FLAGLER ST., STE. 2450  
 COURTHOUSE TOWER  
 MIAMI FL 33130**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME **DP FERNANDEZ-GUZMAN, CARLOS**

STREET ADDRESS **230 WESTWARD DRIVE MIAMI SPRINGS FL 33166**

CITY-ST-ZIP

TITLE  DELETE

NAME **DV FRIEDMAN, ARNOLD**

STREET ADDRESS **230 WESTWARD DRIVE MIAMI SPRINGS FL 33166**

CITY-ST-ZIP

TITLE  DELETE

NAME **DS VALDES FERNANDEZ, MARIA E**

STREET ADDRESS **230 WESTWARD DRIVE MIAMI SPRINGS FL 33166**

CITY-ST-ZIP

TITLE  DELETE

NAME **DT WEINSTEIN, DOROTHY O**

STREET ADDRESS **230 WESTWARD DRIVE MIAMI SPRINGS FL 33166**

CITY-ST-ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4000022219164 and  
 -06/24/97--01099--025  
 \*\*\*\*\*165.00 \*\*\*\*\*165.00

14. I do 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. I am an officer or director of the corporation, 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 change, or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)