

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000004403

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: CARNOTEL, INC.

Current Principal Place of Business:

230 WESTWARD DRIVE
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

P. O. BOX 660007
MIAMI SPRINGS, FL 33266

Current Mailing Address:

230 WESTWARD DRIVE
MIAMI SPRINGS, FL 33166

New Mailing Address:

P. O. BOX 660007
MIAMI SPRINGS, FL 33266

FEI Number: 65-0639407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERIO, MARK V
44 W. FLAGLER STREET
SUITE 2450/COURTHOUSE TOWER
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FERNANDEZ-GUZMAN, CARLOS
Address: 230 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: DVPS () Delete
Name: VALDES-FERNANDEZ, MARIA
Address: 230 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: DVT (X) Delete
Name: WEINSTEIN, DOROTHY O
Address: 230 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FERNANDEZ-GUZMAN, CARLOS
Address: P. O. BOX 660007
City-St-Zip: MIAMI SPRINGS, FL 33266

Title: DVPS (X) Change () Addition
Name: VALDES-FERNANDEZ, MARIA
Address: P. O. BOX 660007
City-St-Zip: MIAMI SPRINGS, FL 33266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA VALDES FERNANDEZ

DVPS

05/01/2002

Electronic Signature of Signing Officer or Director

_____ Date