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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90162 038 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 275086

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CARBUR	ETORS INC							
Principal Place	e of Business	Mailing Address				1 1801/8 (1911) 1800/ 01/3/ 00/07 10/19 01/1 6/63/ 0/6// 0/6// 0/6// 0/6//	şdi	
12831 W DIXIE HWY 12831 W DIXIE HWY NORTH MIAMI FL 33161 NORTH MIAMI FL 33161						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed	$\overline{}$	
****		5- 4- 0: Add				10/24/1963 4. FEI Number Applied For	\dashv	
2. Principal Pl	lace of Business	2a. Mailing Address	Mailing Address			59-1024435 Not Applica		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Cortificate of Status Desired S8.75 Additiona	_	
22	·	27				5. Certificate of Status Desired Fee Required		
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be	سا نجمنی	
23		28				Trust Fund Contribution Added to Fees		
Zip —			Cour	шу		8. This corporation owes the current year Intangible Personal Property Tax.	-	
24	25 29 9. Name and Address of Current Registered Age		30			Personal Property Tax. Syres LINo 10. Name and Address of New Registered Agent		
	9. Name and Address of Current	r Registered Agent		81	Name	10. Name and Address of the State of the Sta		
BOURBEAU, RONALD				82	Street Ar	ess (P.O. Box Number is Not Acceptable)		
4540 SW 42ND TERR FT LAUDERDALE, FL			1	83				
33314					014	85 Zip Code	^	
			İ	84 City		FL		
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 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12								
12.			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN T		
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6.4 CITY-ST-ZIP

14. 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 annual proof 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 of true ee provided to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an argument with an address, with all other like empowered.

WEDLINED