

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

FILED  
Jan 31 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 291793 (8)

1. Corporation Name  
CARLTON TERRACE NORTH CORPORATION



Principal Place of Business  
2142 N E 56TH COURT  
FORT LAUDERDALE FL 33308

Mailing Address  
2142 N E 56TH COURT  
FORT LAUDERDALE FL 33308-2587

3. Date Incorporated or Qualified: 03/18/1966  
3a. Date of Last Report: 02/20/1996  
4. FEI Number: 59-1140272  
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  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country  
24 25

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 30

9. Name and Address of Current Registered Agent  
BERRY, ROBERT L J  
2124 N.E. 58TH COURT  
#101  
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: 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

TITLE	TD	<input type="checkbox"/> DELETE
NAME	COOPER, NORABEL	
STREET ADDRESS	2124 NE 58TH CT	
CITY-ST-ZIP	FT LAUD, FL 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BERRY, ROBERT L J	
STREET ADDRESS	2124 NE 58TH COURT	
CITY-ST-ZIP	FT LAUD, FL 00000	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	TOWNSEND, ARLINE	
STREET ADDRESS	2124 NE 38TH CT.	
CITY-ST-ZIP	FT LAUD, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROOKS, EUGENE	
STREET ADDRESS	2180 NE 58 CT	
CITY-ST-ZIP	FT LAUD, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MORGAN, FRANK	
STREET ADDRESS	2124 N.E. 58TH COURT	
CITY-ST-ZIP	FT LAUD. FL 33308	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DUNNE, WILLIAM	
STREET ADDRESS	2124 NE 58TH COURT	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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; 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, or on an attachment with an address.

SIGNATURE: *Robert L Berry* DATE: 1/29/97 DAYTIME PHONE: 491-2764

CR2E034 (9/96)