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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 488476

(3)

CAREY INVESTMENT CORPORATION, INC.

Mailing Address

POST OFFICE BOX 308 NEW PROT RICHEY FL 34656-0308

Principal Place of Business

POST OFFICE BOX 308 NEW PROT RICHEY FL 34656-0308

FILED Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1975

Suite, Apt #, etc. Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required City & State Suite, Apt. #, etc. Fee Required Fee Required Fee Required Fee Required Fee Required St. Trust Fund Contribution Added to Fees Zip Country South, Apt. #, etc. Fee Required Fee Required St. Discription Comparing Financing Added to Fees Added to Fees Fee Required St. Discription Comparing Financing Added to Fees Added to Fees	Z. Frincipai Fi	Place of Business Za. Maining Address				4. FEI Number	L AF	oplied For	
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Zip Country Zip Country Zip Country B. This corporation owes on has palt the current year finangible Personal Proporty Tax Citu July No.	_								
Second Property Tax due June 30. See No.	Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible			
WERNER, E. V. 4932 MARLIN DR. NEW PORT RICHEY FL 34652 82 Street Address (P.O. Box Number is Not Acceptable) 83 Marge 84 City FL 85 Zip Code 85 86 Received Sections S07.0502 and 697.1598, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the proposed care agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the proposed care agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the proposed care agent. I am familiar with, and accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the obligations of, Section 697.0508, Floridal Statutes, the above-named corp	24	25	29	30		Personal Property Tax due June 30. Yes No			
WEHNER, E. V. 4932 MAPLIN DR. NEW PORT RICHEY FL 34652 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City FL 85 Zip Code 85 City FL 86 Size Code 86 City FL 86 Size Code 87 City FL 88 Size Code 88 City FL 88 Size Code 89 City FL 88 Size Code 89 City FL 89 Size Code 89 City FL 80 City		Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent				
4932 MARLIN DR. NEW PORT RICHEY FL 34652 82 Street Address (P.O. 8ox Number is Not Acceptable) 83 84 City	WERNER, E. V.				Name				
NEW PORT RICHEY FL 34652 A	· · · · · · · · · · · · · · · · · · ·				Street Addre	oce (P.O. Roy Number is Not Acceptable)			
SIGNATURE Symbol or present rate of registered agent, or both, in the State of Florida, Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,050S, Florida Statutes. SIGNATURE Symbol or present agent agent and live if applicable DATE DETECTORS Not application of the provision of the provisio					Street Address (F.O. Box Number is Not Acceptable)				
The 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, and the appointment as 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, 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, 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, or both in the appointment as registered agent, agent age	NEW FORE INDINE				83				
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11. Pursuant to the provisions of Sections 607 (502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the solid official 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 private famine of inglittened agent and like if appointment and like if appointment agent agent along the statutes. Signature. Typed or private famine of inglittened agent and like if appointment agent ag	<u>.</u> 			84	City	FI	85 Zip	Code	
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		ertify that the information supplied w	ith this filing does not qualify for			section 119.07(3)(i), Florida Statutes. I further of	ertify 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 are 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 applicationment with an address.

SIGNATURE: