

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION ANNUAL REPORT 1995**

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

**DOCUMENT # G57829 (5)**

1. Corporation Name  
**CAROLLA PATIO SHOP, INC.**

Principal Place of Business  
**2932 N. ANDREWS AVENUE  
FT. LAUDERDALE FL 33311**

Mailing Address  
**2932 N. ANDREWS AVENUE  
FT. LAUDERDALE FL 33311**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/01/1983**      3a. Date of Last Report **01/21/1994**

4. FEI Number **59-2324437**      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      28. Zip      29. Country      30. Country

9. Name and Address of Current Registered Agent

**CAROLLA, JEROME T.  
2932 N. ANDREWS AVENUE  
FT. LAUDERDALE FL 33311**

10. Name and Address of New Registered Agent

81. Name **Grant W. Hucker, Jr.**

82. Street Address (P.O. Box Number is Not Acceptable) **2932 N Andrews Avenue**

83. City **Ft. Lauderdale**      84. State **FL**      85. Zip Code **33311**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute, 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 obligation of Section 607.0505, Florida Statute.

SIGNATURE: *Grant W. Hucker, Jr.*      **8459 Dunastay Dr. Ft. Lauderdale Fla. 33433**      **4/12/95**

(Type or print name of registered agent or its representative)      (NOTE: Registered Agent signature required when registering)      DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HUCKER, GRANT W JR.</b>	1.2 NAME	
STREET ADDRESS	<b>2932 NO. ANDREWS AVENUE</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FT LAUDERDALE, FL 00000</b>	1.4 CITY - ST - ZIP	
TITLE	<b>VS</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HUCKER, GERALYN</b>	2.2 NAME	
STREET ADDRESS	<b>2932 NO. ANDREWS AVENUE</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FORT LAUDERDALE FL</b>	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statute. 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 Statute; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Grant W. Hucker, Jr.*      **Grant W. Hucker, Jr.**      **4/12/95**      **5664515**

(Type or print name of signing officer or director)      (Date)      (Signature Number)