

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

AMENDED
\$61.25
FILED

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

09 AUG -9 PM 2:56

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H33895

1. Corporation Name

CARWEL, INC.

Principal Place of Business

Mailing Address

3506 23rd Ave. W. 3506 23rd Ave. W.
Bradenton, FL. 34205 Bradenton, FL. 34205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1984

4. FEI Number

59-2613520

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 owes the current year Intangible
Personal Property Tax ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3201 26th Street W

26 3201 26th Street W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Bradenton, FL

28 Bradenton, FL

Zip

Country

Zip

Country

24 34205 25 USA

29 34205 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MacDonald, Robert B
3506 23rd Ave. W
Bradenton, FL. 34205

81 Name
Elven Dion Mullis

82 Street Address (P.O. Box Number is Not Acceptable)
3201 26th St. West

83

84 City
Bradenton, FL 85 Zip Code
34205

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

Elven Dion Mullis

(NOTE: Registered Agent signature required when reinstating)

DATE

8/4/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE

NAME MacDonald, Robert

STREET ADDRESS 3506 23rd Ave. W.

CITY-ST-ZIP Bradenton, FL

TITLE C ☒ DELETE

NAME MacDonald, Robert B.

STREET ADDRESS 105 Skelding St.

CITY-ST-ZIP Chittenango, NY

TITLE T ☒ DELETE

NAME MacDonald, Marjorie C.

STREET ADDRESS 3506 23rd Ave. W

CITY-ST-ZIP Bradenton, FL

TITLE S ☒ DELETE

NAME MacDonald, Anne M.

STREET ADDRESS 3506 23rd Ave. W.

CITY-ST-ZIP Bradenton, FL

LE ☐ DELETE

ME

REET ADDRESS

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11 TITLE P.D.T. ☐ Change ☒ Addition

12 NAME Mullis, Elven Dion

13 STREET ADDRESS 3201 26th Street West

14 CITY-ST-ZIP Bradenton, FL. 34205

21 TITLE S ☐ Change ☒ Addition

22 NAME Mullis, Judith Rae

23 STREET ADDRESS 3201 26th Street West

24 CITY-ST-ZIP Bradenton, FL. 34205

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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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 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, with all other like empowered.

SIGNATURE: Robert B MacDonald

Robert B MacDonald 8/4/99

941-747-6108

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)