

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

FILED

Jan 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # H76826

(7)

1. Corporation Name

CARLIN FABRICATORS, INC.

Principal Place of Business

1441 S.W. 30TH AVENUE, #17
POMPANO BEACH FL 33069

Mailing Address

1441 S.W. 30TH AVENUE, #17
POMPANO BEACH FL 33069



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/19/1985

2. Principal Place of Business

2a. Mailing Address

21 1205 N.E. 9th Ave.

26 1205 N.E. 9th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Fort Lauderdale, FL

28 Fort Lauderdale, FL

Zip

Country

Zip

Country

24 33304

25 U.S.

29 33304

30 U.S.

4. FEI Number

59-2582055

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

TRENTACARLINI, LORENZO
1441 S.W. 30 AVE #17
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

Trentacarlini, Lorenzo

82 Street Address (P.O. Box Number is Not Acceptable)

1205 N.E. 9th Ave.

83

84 City

Fort Lauderdale

FL

85 Zip Code

33304

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 LORENZO TRENTACARLINI

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/15/98

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME TRENTACARLINI, LORENZO
STREET ADDRESS 1441 SW 30TH AVE, #17 P
CITY-ST-ZIP OMPANO BCH, FL 33069

TITLE
NAME
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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Trentacarlini, Lorenzo
1.3 STREET ADDRESS 1205 N.E. 9th Ave.
1.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

2.1 TITLE Treasurer
2.2 NAME Aloisia Trentacarlini
2.3 STREET ADDRESS 1205 N.E. 9th Ave
2.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

3.1 TITLE 1st Vice President
3.2 NAME Laura Trentacarlini
3.3 STREET ADDRESS 1205 N.E. 9th Ave.
3.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

4.1 TITLE 2nd Vice President
4.2 NAME Lorenza Trentacarlini
4.3 STREET ADDRESS 1205 N.E. 9th Ave.
4.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

5.1 TITLE Chairman
5.2 NAME Robert Trentacarlini
5.3 STREET ADDRESS 1205 N.E. 9th Ave.
5.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

6.1 TITLE Secretary
6.2 NAME Fleischman, George
6.3 STREET ADDRESS 1205 N.E. 9th Ave.
6.4 CITY-ST-ZIP Fort Lauderdale, FL 33304

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 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: LORENZO TRENTACARLINI

Lorenzo Trentacarlini

1/15/98

954-522-2444

CR2E034 (10/97)