

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H76826

FILED  
Feb 22, 2011  
Secretary of State

Entity Name: CARLIN FABRICATORS, INC.

**Current Principal Place of Business:**

1621 NE 51 ST  
FORT LAUDERDALE, FL 33334 US

**New Principal Place of Business:**

**Current Mailing Address:**

1621 NE 51 ST  
FT LAUDERDALE, FL 33334 US

**New Mailing Address:**

FEI Number: 59-2582055      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARLINI, LORENZO  
1621 NE 51 ST  
FT LAUDERDALE, FL 33334 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARLINI, LORENZO  
Address: 1621 NE 51 ST  
City-St-Zip: FT LAUDERDALE, FL 33334

Title: T  
Name: TRENTACARLINI, ALOISIA  
Address: 1621 NE 51 ST  
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VP  
Name: TRENTACARLINI, LAURA  
Address: 1621 NE 51 ST  
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VP  
Name: TRENTACARLINI, LORENZA  
Address: 1621 NE 51 ST  
City-St-Zip: FT LAUDERDALE, FL 33334

Title: C  
Name: TRENTACARLINI, ROBERT  
Address: 1621 NE 51 ST  
City-St-Zip: FT LAUDERDALE, FL 33334

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LORENZO T CARLINI

PRES

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date