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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K16400

(9)

CAROLINA TREES, INC.

FILED Jan 23 1998 8:00am Secretary of State

Mailing Address Principal Place of Business 4720 S.W. 166TH AVENUE 4720 S.W. 166TH AVENUE FT. LAUDERDALE FL 33331 FT. LAUDERDALE FL 33331 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/23/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0024757 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Added to Fees Trust Fund Contribution Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAHER, ROBERT A 4720 S.E. 168TH AVENUE 62 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33331 83 84 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or punted name of registers tagent and tice if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TUTLE Change MAHER, ROBERT A. E034 NAME 1.2 NAME 4720 S.W. 166TH AVENUE 1.3 STREET ADORESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 C(1) Y - \$1-7IP DELETE Change Addition TITLE 2111116 MAHER, CONSTANCE A. NAME 22 NAME 4720 S.W. 188TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2 4 CHY-ST-7IP DELETE Change Addition TITLE 3.1 THEF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 4.1 TILLE Change Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - 7(P CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6 1 THUE NAME 6.2 NAME 6.3 STREET ADDRESS ***150.00 STREET ADDRESS 6.4 CITY - \$1 - 7IP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos. 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 eath, 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 Statutos; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Relitate Maker D.

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