

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L50431 (0)

1. Corporation Name

CARRIAGE ENTERPRISES, INC.

Principal Place of Business

1000 SW 83RD AVE
N LAUDERDALE FL 33068

Mailing Address

1000 SW 83RD AVE
N LAUDERDALE FL 33068

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/16/1990

3a. Date of Last Report

07/11/1994

2. Principal Place of Business

21 401 SW 75 WAY

2a. Mailing Address

26 401 SW 75 WAY

Suite, Apt. #, etc.

22 N. LAUDERDALE

Suite, Apt. #, etc.

27

City & State

23 FLORIDA

City & State

28 N. Lauderdale FL.

Zip

24 33068

Country

Zip

29 33068

Country

30

4. FEI Number

59-2994709

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

9. Name and Address of Current Registered Agent

CHANNER, ICAR
1000 SW 83RD AVE
N LAUDERDALE FL 33068

10. Name and Address of New Registered Agent

B1 Name CHANNER ICAR

B2 Street Address (P.O. Box Number is Not Acceptable)

B3 401 SW 75 WAY

B4 City N. Lauderdale

FL

B5

Zip Code
33068

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

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

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
CHANNER, ICAR
1000 SW 83RD AVE
N LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
PSTD
CHANNER, ICAR
401 SW 75 WAY
N. LAUDERDALE FL. 33065
☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change

☐ Addition

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 110.07(3)(b), 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 addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ICAR CHANNER

4-28-95 721 7125
Date (typed Name)