

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M12273 (2)

1. Corporation Name

CARISAM INTERNATIONAL CORP.

Principal Place of Business

**2315 N.W. 107 AVE.
MIAMI FL 33172**

Mailing Address

**2315 N.W. 107 AVE.
MIAMI FL 33172**

**APPROVED
AND
FILED**

95 APR 24 AM 8:24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/07/1985	3a. Date of Last Report 02/21/1994
4. FEI Number 59-2502723	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	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HOWIE, JEROME A.
STREET ADDRESS	5070 NW 93RD DORAL PL
CITY - ST - ZIP	MIAMI FL
TITLE	VD
NAME	ALARD, ENRIQUE S.
STREET ADDRESS	12982 S.W. 115TH TERR.
CITY - ST - ZIP	MIAMI FL
TITLE	VD
NAME	BERSTEIN, DAVID
STREET ADDRESS	2403 STILL FOREST ROAD
CITY - ST - ZIP	BALTO MD 21208
TITLE	VD
NAME	COURI, JOHN
STREET ADDRESS	44 MULBERRY ST.
CITY - ST - ZIP	RIDGEFIELD CT 06877
TITLE	VSTD
NAME	EGAN, GERALD
STREET ADDRESS	6 FENCE CREEK DR.
CITY - ST - ZIP	MADISON CT 06443
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 this 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:

David H Bernstein **DAVID H BERNSTEIN**

4/12/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Printed)