

FILE NOW. FILING FEE AFTER MAY 1 IS \$350.00

PROFIT
CORPORATION
ANNUAL REPORT
2001



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

FILED
Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90008 017 ***150.00

DOCUMENT # P00000037109
1. Corporation Name

MCCARTY CONSULTING INC

Principal Place of Business Mailing Address

1011 NE 204th Lane SAME
North Miami Beach Fl 33179

C0074884

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 4/7/00		3a. Date of Last Report	
21 Suite, Apt. #, etc.		2a Suite, Apt. #, etc.		4. FEI Number 65-1002702		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

Sharon Kraft
ABC Bookkeeping Service
4435 SW 26th Ave
Ft Lauderdale Fl 33312

10. Name and Address of New Registered Agent

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

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 not applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Barbara Israel <input type="checkbox"/> DELETE	1.1 TITLE	BOBBIE MCCARTY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1011 NE 204th Lane	1.2 NAME	1011 NE 204th Lane
STREET ADDRESS	N Miami Beach Fl 33179	1.3 STREET ADDRESS	N. MIAMI BEACH FL 33179
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 or changed, or on an attachment with an address.

SIGNATURE:

Bobbie McCarty
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01

954-9668083

20F2

Attachment Doc#
P0000037109
C0074884

ABC BOOKKEEPING SERVICE
4435 SW 26TH AVENUE
FT LAUDERDALE FLORIDA 33312
(954- 966-8083)

JULY 5, 2001

DEPT OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT DIVISION
P O BOX 6327
TALLAHASSEE FL 32314

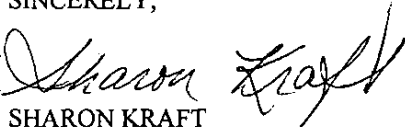
RE: WHERE TO LIMOUSINE INC P99000078578

& MCCARTY CONSULTING INC P00000037109

BOTH OF THESE CORPORATIONS, I AM NAMED AS REGISTERED AGENT. I DID NOT RECEIVE RENEWAL FOR EITHER CORPORATION FOR YEAR 2001. I TYPED BLANK FORMS OUT AND MAILED WITH THEIR CHECKS FOR \$150.00 EACH. THIS WAS APRIL 16. TO DATE NEITHER CHECK HAS CLEARED THE BANK FOR THESE TWO CLIENTS. I CALLED YOUR OFFICES LAST WEEK AND THEY INFORMED ME THAT NOTHING HAD BEEN RECEIVED. I AM THEREFORE SENDING 2 NEW REPORTS WITH REPLACEMENT CHECKS ON EACH CORPORATION. WE ARE RESPECTFULLY REQUESTING REINSTATEMENT OF THESE TWO CORPORATIONS.

THANK YOU FOR YOUR TIME AND ATTENTION TO THIS MATTER.

SINCERELY,


SHARON KRAFT
ABC BOOKKEEPING SERVICE

COPY TO: TOMAS E. MENDEZ, PRES

BARBARA ISREAL, PRES.

Attachment
Doc# P00000037109
C0074884



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 23, 2001

SHARON KRAFT
ABC BOOKKEEPING SERVICE
4435 SW 26TH AVENUE
FT LAUDERDALE, FL 33312

SUBJECT: MCCARTY CONSULTING, INC.
Ref. Number: P00000037109

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

Provide the title(s) of each officer/director listed on the report or on an attachment.

The person that signed the annual report/uniform business report is not listed as a current officer/director of the corporation. The person signing must be listed as a current officer/director on the report or on an attachment.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 901A00042776

*Attached per your request
Sharon Kraft
ABC Bookkeeping Serv.*