## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P00000110114**

1. Entity Name

CARDIN INVESTMENTS CORPORATION



Principal Place of Business

1419 S. FEDERAL HIGHWAY HOLLYWOOD, FL 33020 Malling Address

1419 S. FEDERAL HIGHWAY HOLLYWOOD, FL 33020

## FILED Apr 04, 2006 08:00 AM Secretary of State



	DO	NOT	WRIT	TE IN	THIS	SPACE
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กรรรรกกล	No Chg-P	CR2E034 (11/05
03272006	NO CUB-L	CM2E034 (11103

4. FEI Number	Applied For	
65-1059727	Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional	

6. Name and Address of Current Registered Agent

GAUTHIER, GERALD 1419 S. FEDERAL HIGHWAY HOLLYWOOD, FL 33020

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its register	red office or re	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title in	applicable (NOTE: Register)	ed Agent aignative	required when remstaling)	DATE
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	1		
TITLE NAME STREET ADDRESS CITY-ST-ZW	O GAUTHIER, GERALD 1419 S. FEDERAL HIGHWAY HOLLYWOOD, FL 33020				
itle Name Street address City-St-Zip					(1000000490906 04/19/06-80001-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ı		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY+S7-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby	certify that the information supplied with this fi	ling does not qualify for the ex	kemptions car	ntained in Chapter 119	9, Florida Statutes. I further certify that the information

12. Increase carring that the information supplied with this time 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06 959 -933 -