

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002927

Entity Name: CARFIT INDUSTRIES, INC.

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

3126 JOHN P. CURCI DRIVE
BLDG. 4C, BAY 4
PEMBROKE PARK, FL 33009

Current Mailing Address:

3126 JOHN P. CURCI DRIVE
BLDG. 4C, BAY 4
PEMBROKE PARK, FL 33009

New Principal Place of Business:

3125 JOHN P. CURCI DRIVE
BLDG. 1-B, BAY 6
PEMBROKE PARK, FL 33009

New Mailing Address:

3125 JOHN P. CURCI DRIVE
BLDG. 1-B, BAY 6
PEMBROKE PARK, FL 33009

FEI Number: 65-1065567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAPIRO, MANUEL
21175 MAINSAIL CIRCLE, E-15
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHAPIRO, MANUEL
Address: 21175 MAIN SAIL CIRCLE
City-St-Zip: AVENTURA, FL 33180

Title: SVD () Delete
Name: BLUMEN, MOISES
Address: 21175 MAIN SAIL CIRCLE
City-St-Zip: AVENTURA, FL 33180

Title: TD () Delete
Name: SCHAPIRO, SUSY
Address: 21175 MAIN SAIL CIRCLE
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL SCHAPIRO

PRES

04/22/2005

Electronic Signature of Signing Officer or Director

Date