2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000065217

1. Entity Name

CARROLL STREET BOYS RE, INC.



FILED Apr 21, 2008 8:00 am Secretary of State

04-21-2008 90088 010 ***150.00

Principal Place of Business

4290 10TH AVE NORTH

103

LAKE WORTH, FL 33461

Mailing Address

1206 FOSTER MILL LN BOYNTON BEACH, FL 33436



04152008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1122935

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

J. Certificate of Status

6. Name and Address of Current Registered Agent

MILLER, BONNIE S 9050 PINES BLVD., SUITE 384
PEMBROKE PINES, EL 33024

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8.	8. 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. I	am familiar with,	and accept
	the obligations of registered agent.		

SIGNATURE

Signature, typed of printed name of registered agent and title il applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	.VP
NAME	RAPUZZI, GEORGE
STREET ADDRESS	39 BEVY CT
CITY-ST-ZIP	BROOKLYN, NY 11212
TITLE	P
NAME	ANTICO, PHILIP
STREET ADDRESS	101 NORTH US HWY 1, SUITE 112
CITY-ST-ZIP	FORT PIERCE, FL 34950
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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-entrustee empowered to execute this report as required by Chapter 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/204

Daytime Phone #