## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # P02000021937

1. Entity Name

CARFAX PROPERTIES, INC.



May 21, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9401 SOUTHWEST 94TH COURT MIAMI, FL 33176

POST OFFICE BOX 165134 MIAMI, FL 33116



**FILED** 

03132003

No Chg-P

CR2E034 (10/03)

4. FEI Number 01-0618990

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

305 898-185

6. Name and Address of Current Registered Agent

HAMITTAI-SMITH, SUSAN J 9401 SW 94 CT MIAMI, FL 33176

SIGNATURE: 2020

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		1			
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 or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when releasible g).					
FILE NOW!!! FEE IS \$150.00 9. Due by September 8, 2004		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRECT	FORS			
THRE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HAMILTON-SMITH, SUSAN J 9481 SOUTHWEST 94TH COURT MIAMI, FL 33176	-		U00000161159	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/21/04-80002-008 158.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZBP					
12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					