## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 04, 2008 08:00 All Secretary of State **DOCUMENT # P02000113033** 1. Entity Name CARL'S EXCAVATOR SERVICE INC Principal Place of Business Mailing Address 8850 NW 3RD STREET 8850 NW 3RD STREET PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 04012008 No Chg-P CR2E034 (11/05) THIS SPACE Applied For 4. FEI Number 16-1640327 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SINGLETARY, CARLENTINE DO NOT WRITE 8850 NW 3RD STREET PEMBROKE PINES, FL 33024 IN THIS SPACE 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 (NOTE: Received Agent acceptum required when remetation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS U00000880492 TITLE **PVST** SINGLETARY, CARLENTINE STREET ADDRESS 8850 NW 3RD STREET CITY-ST-78 PEMBROKE PINES, FL 33024 TITLE NUME SINGLETARY, CARLENTINE STREET ADDRESS 8850 NW 3RD STREET CITY-ST-ZIP PEMBROKE PINES, FL 33024 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-7P

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 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

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