2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000049670

1. Entity Name
CARROLL APPAREL, INC.

Principal Place of Business	Mailing Address
11404 ORANGE GROVE DRIVE	11404 ORANGE GROVE DRIVE
TAMPA, FL 33618 US	TAMPA, FL 33618 US

DO NOT WRITE IN THIS SPACE

01032005   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-3160617		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TOM, CARROLL
11404 ORANGE GROVE DRIVE
TAMPA, FL 33618

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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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	P	
NAME	CARROLL, TOM	
STREET ADDRESS	11404 ORANGE GROVE DRIVE	
CITY-ST-ZIP	TAMPA, FL 33618	
TITLE	VP	
NAME	CARROLL, JEAN	
STREET ADDRESS	11404 ORANGE GROVE DRIVE	
CITY-ST-ZIP	TAMPA, FL 33618	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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 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.

SIGNATURE: _Jean Carroll_   JEAN CARROLL   1/22/05   8139326476
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #