2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000130485

1. Entity Name
CARZRED, INC.

Principal Place of Business

7370 GULF BLVD
SAINT PETERSBURG, FL 33706

Mailing Address

7370 GULF BLVD
SAINT PETERSBURG, FL 33706

DO NOT WRITE IN THIS SPACE

04302007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0386491	Not Applicable

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

6. Name and Address of Current Registered Agent

~~ARNOLD X JEFFREY R~~ GIBELLINA, GLEN
~~13489 CORONADO DR~~ 2473 TWIN DR
~~LARGO, FL 33774~~ SARASOTA, FL 34234

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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 _Glen Gibellina_ D   4/30/07
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, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GIBELLINA, GLEN
STREET ADDRESS	2473 TWIN DR
CITY-ST-ZIP	SARASOTA, FL 34243

TITLE	AMGR
NAME	CARLSON, CINDY
STREET ADDRESS	6363 1ST AVE NORTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33710

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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: _Glen Gibellina_   4/30/07   941.296.5489
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #