2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # P04000024683 02-16-2006 90059 044 ***150.00 1. Entity Name DON CARTER CARPENTRY INC. Mailing Address Principal Place of Business 3418 SW 162ND ST ARCHER FL 32618 3418 SW 162ND ST ARCHER FL 32618 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For City & State City & State 11-3712758 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent _Name___ SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145 City Zio Code 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE ☐ Delete TITLE ☐ Change CARTER, DONALD J NAME STREET ADDRESS STREET ADDRESS 3418 SW 162ND ST CITY-ST-ZIP CITY-ST-ZIP ARCHER FL 32618 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADURESS CITY-ST-ZIP CITY-ST-ZIP Change Addition THILE ☐ Detete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

DONALD J. CARTER

SIGNATURE:

FILED

Feb 16, 2006 8:00 am

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