

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # P05000089147

1. Entity Name
CARLOS G. BETANCOURT, INC.



Principal Place of Business
**2204 VINSON AVE
SARASOTA, FL 34232**

Mailing Address
**2204 VINSON AVE
SARASOTA, FL 34232**



03102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3033726

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BETANCOURT, CARLOS
2204 VINSON AVE
SARASOTA, FL 34232**

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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

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 NAME STREET ADDRESS CITY-ST-ZIP	P BETANCOURT, CARLOS 2204 VINSON AVE SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BETANCOURT, LEONY 2204 VINSON AVE SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/04/07-80076-012 150.00

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/07

Date

941-376-0076

Daytime Phone #