

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90113 048 ***150.00

DOCUMENT # P06000103408

1. Entity Name

KARELL, INC.



Principal Place of Business

9840 MAJESTIC WAY
BOYNTON BEACH FL 33437
US

Mailing Address

9840 MAJESTIC WAY
BOYNTON BEACH FL 33437
US



2. Principal Place of Business - No P.O. Box #

10300 W. Forest Hill Blvd.
Suite, Apt. #, etc.
FC105

3. Mailing Address

9840 Majestic Way
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

Wellington, FL

Zip

33414

Country

USA

City & State

Boynton Beach, FL

Zip

33437

Country

USA

4. FEI Number

20-5346022

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SLATIN, MITCHELL L
9840 MAJESTIC WAY
BOYNTON BEACH FL 33437

7. Name and Address of New Registered Agent

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip 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.

SIGNATURE

Mitchell Slatin (NO change to Registered Agent being made)

4-7-08

Signature, typed or printed name of registered agent and street applicable.

(NOTE: Registered Agent signature required when completing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME SLATIN, MITCHELL L
STREET ADDRESS 9840 MAJESTIC WAY
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE VP
NAME SLATIN, KAREN C
STREET ADDRESS 9840 MAJESTIC WAY
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE S
NAME SLATIN, MITCHELL L
STREET ADDRESS 9840 MAJESTIC WAY
CITY-ST-ZIP BOYNTON BEACH FL 33438

TITLE T
NAME SLATIN, KAREN C
STREET ADDRESS 9840 MAJESTIC WAY
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
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.

SIGNATURE:

Mitchell Slatin

4-7-08

561-441-4778

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #