Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90001 010 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300007721

1. Corporation Name

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Jenny Land Barry

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

TITLE

NAME

CAREY	SINGER, INC.								
Principal Place of Business Mailing Address						- (181188) (28 1838 (211 884) 884) 884)	19911 18811		
2201 GROUPER DRIVE MARATHON SHORES FL 33050 US		2201 GROUPER DRIVE MARATHON SHORES FL 33050 US				DO NOT WRITE IN THIS SP	ACE		
						3. Date Incorporated or Qualifed 01/27/1993			
2. Principal P	lace of Business	2a. Mailing Address	-		•	4. FEI Number 65-0392047		pplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					•	Additional lequired	
	City & State City & State					6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country 25	Zip 30	Country	y		This corporation owes the current year Intang Personal Property Tax.	ible Yes	□No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Age	∍nt		
BUSCH, EDWARD F CPA 5800 OVERSEAS HWY.				S	lame itreet Addr	ress (P.O. Box Number is Not Acceptable)			
SUITE 6 MARATHON FL 33050			83	L			- ,		
			84	-	City	FL	<u> </u>	Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	if Florida. Such change was auth	orized by	/ the	med corporation	poration submits this statement for the purpose of cha on's board of directors. I hereby accept the appointm	inging its ent as re	s registered egistered	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable.					nature require	nd when reinstating) DATE			
			13.	_		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	ORS IN 12	
TITLE	D DELETE		1.1 TITLE] Change	Addition	
NAME	SINGER, CAREY	13		1.2 NAME		•			
STREET ADDRESS	COOK OROUNED DRIVE		1.3 STREET ADDRESS		DRESS				
CITY+ST-ZIP	The state of the s		1.4 CITY-ST-ZIP		,				
TITLE		☐ DELETE	2.1 TITLE] Change	☐ Addition	
NAME			2.2 NAME			_			

TITLE الا مَثْلُو مِنْ وَيُو مِنْ وَالْمُ مِنْ لَا مِنْ وَالْمُوالِينِ لِلْهِ مِنْ اللَّهِ مِنْ اللَّهِ مِنْ 6.2 NAME NAME D. 野野福 法* 6.3 STREET AODRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

2.3 STREET ADDRESS

2. 4 CITY-ST-ZIP

3.4, CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME 3.3 STREET ADDRESS

4.1 TTLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

□ DELETE

□ DELETE

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DELETE

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Addition

☐ Addition

Addition

☐ Addition

☐ Change

Change

Change

Change