## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000021156

1. Corporation Name

CARLSON & CARLSON, INC.

## **FILED** Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90140 004 \*\*\*150.00



Principal Plac	e of Business	Mailing Address					
3209 68TH AVENUE NORTH ST. PETERSBURG FL 33702		3209 68TH AVENUE NORTH ST. PETERSBURG FL 33702					
					DO NOT WRITE IN THIS SPACE		
					Date Incorporated or Qualifed		
					03/17/1993		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	A	opplied For
21		26			59-3176060		lot Applicable
Suite, Apt. #, etc		Surte Apt # etc			\$8.75	Additional	
22		27		5. Certificate of Status Desired [	Fee F	Required	
City & State		City & State		6. Election Campaign Financing	\$5.00	<b>)</b> Мау Ве	
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Col	intry	8. This corporation owes the current	year Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	□No
1	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	
				81 Name			
	RLSON, GEORGE M			82 Street Add	dress (P.O. Box Number is Not Acceptable		
3209 68TH AVENUE NORTH				J. Silver Add	2.000 (. O Don Hambor to Hot Abboptable	,	
ST.	PETERSBURG FL 33702			83			
						9E 7:r	Code
				84 City		FL  85   ZIF	Code
SIGNATURE	am familiar with, and accept the obligat			Agent signature requi	ed when reinstating)	DATE	
12.	OFFICERS ANI		13.	<del> </del>	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12
TITLE	D	DELETE	111	TLE		Change	Addition
NAME	CARLSON, GEORGE M		12 N	4ME			
STREET ADDRESS	ARREST AND		138	REET ADDRESS			
CITY-SI-ZIP	ST. PETERSBURG FL 33702		140	TY-ST-ZIP			
TITLE	01.1212100011072 00102	☐ DELETE	2 1 TI		_	☐ Change	Addition
NAME			2.2 N	AME			
STREET ADDRESS			238	TREET ADDRESS			
CITY-ST-ZIP			4.40	I ITN ST ZIP			
TITLE		THE STEEL ST	3 1		<u> </u>	Change	Addition
NAME			32 N	AME !			
STREET ADDRESS			33S	REFT ADDRESS			
CITY-ST-ZIP			34 0	IITY - ST - ZIP			
TITLE		☐ DELETE	41T			☐ Change	e 🔲 Acdition
NAME			4 21	AME			
STREET ADDRESS			435	TREET ADDRESS			
CITY-ST-ZIP			440	ITY-ST-ZIP			
TITLE				71.5		Change	e 🔲 Acdition
NAME		☐ D€LETE	<b>[</b> [517]	1		Change	_
STREET ADDRESS	<b>\</b>	☐ D€LETE	5176 52N	<b>I</b>			_
		☐ DELETE	52 N	<b>I</b>		Change	
CITY-\$1-ZIP		□ D€LETE	52 N 53 S	AME		C Glange	
CITY-\$1-ZIP		☐ DELETE	52 N 53 S	AME TREET ADDRESS TY-ST-ZIP		Change	
_			52 N 53 S 54 C	AME TREET ADDRESS ITY-ST-ZIP TLE			
TITLE NAME			52 N 53 S 54 C 61 Tl 52 N	AME TREET ADDRESS ITY-ST-ZIP TLE			
TITLE			52 N 53 S 54 C 61 Tl 52 N 63 S	AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME			

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 | 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: