

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000036857

FILED
Apr 14, 2008
Secretary of State

Entity Name: CARCAND, INC.

Current Principal Place of Business:

9700 S. DIXIE HWY.
SUITE 1030
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

9700 S. DIXIE HWY.
SUITE 1030
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 59-3186050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMOLE, MYRON M
9700 S DIXIE HWY
SUITE 1030
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAMOLE, MYRON M
Address: 9700 S DIXIE HWY SUITE 1030
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: HARTE, SAMUEL
Address: 7251 SW 129TH STREET
City-St-Zip: MIAMI, FL

Title: SD (X) Delete
Name: LEWIS, JOHN M.
Address: 9400 S. DADELAND BLVD.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAMOLE, MYRON M
Address: 9700 S DIXIE HWY SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: TD (X) Change () Addition
Name: HARTE, SAMUEL
Address: 1775 KENDALL BRANCH
City-St-Zip: PINECREST, FL 33256

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MYRON M SAMOLE

PD

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date