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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000019000 (6)

C&T CARRYER, INC.

FILED May 09 1997 8:00am Secretary of State



Principal Place RT. 1. BOX 234 BRONSON FL 3	0	Mailing Address RT. 1, BOX 2340 BRONSON FL 32621	RT. 1. BOX 2340									
							3. Date Incorporated or Qualified 3a. Date of Last Report 03/10/1994 03/15/1996			•		
	ace of Business O Mを フラザ CT	2a. Mailing Address	26. Mailing Address 26 P.O. Boy 1122				4. FEI Number	00			Applied For	
21 2 // 6 0 Suite, Apt		Surte, Apt. #, etc.	-				59-32336				Not Applicable Additional	
22	,	27					 Certificate of 	Status Desired	ı 🗀		Required	
 City & State 		City & State		· ,		1	6. Election Cam		9 [7]		May Be	
23 BRO	Country	28 BROWSON		-人 Country			Trust Fund Co B. This corporat		for intensib		d to Fees	
24 3265		29 32621	30	LE		'	Florida Statut		Yes		8. 199,032,	
	9. Name and Address of C	urrent Registered Agent					0. Name and A	ddress of Nev	v Registere	d Agent		
	RYER, CARL			81	Name							
	1 , BOX 2340			62	Street	Address	(P.O. Box Numb	er is Not Acce	ptable)			
BRO	NSON FL 32621			B3						.~ 		
						·,						
				84	City				F	85 Zi	p Code	
office or re agent. Far	egistered agent or both, in the	7.0502 and 607.1508, Florida Stat State of Florida. Such change was obligations of, Section 607.0505, F	author	rized by	the con							
SIGNATURE .	Signature, typed or printed name of register	rud agent and title if applicable. (NO	OTE: Regis	stered Agr	nt signature	e required wt	nen reinstaling)		DATE			
12.		S AND DIRECTORS		13.			ADDITIONS/CI	HANGES TO C	FFICERS AN			
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CITY-ST ZIP				5.4 CITY - S	T - Z IP	ļ	***************************************		, www.			
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STREET ADDRESS					ADDRESS							
C-Ty - 51 - 71P			_	SACITY-	37-21P		0 11 12 140 0-11	NACE PROJECT OF				
14. I do heret informatio I am an of appears in	by certify that the information sun in indicated on this annual repo- fficer or director of the corporat in Block 12 or Block 13 if chang	upplied with this filing does not our ry or supplemental angual report is fon or the author of troster empo led, or on an alta inment with an a	nity for s true of oweled ddress.	ne exe nd acc to exec	imption turate and oute this	stated in t d that my report as	section 119.07(3 signature shall li required by Ch	agai), Fiorida St nave the same apter 607, Flor	aiutes. I fürlt legal effect ida Statutes;	er certify the as if made and that m	iai the under oath; th y name	