
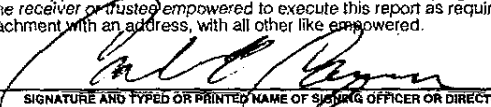


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 12, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000019000</b> 1. Entity Name <b>C&amp;T CARRIER, INC.</b>		
Principal Place of Business <b>11250 NE 77TH CT BRONSON, FL 32621 US</b>		Mailing Address <b>11250 NE 77 TH CT BRONSON, FL 32621 US</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
5. Name and Address of Current Registered Agent  <b>CARRIER, CARL 11250 NE 11TH COURT BRONSON, FL 32621</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARRIER, CARL E 11250 NE 77TH CT BRONSON, FL	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>DO NOT WRITE IN THIS SPACE</b>  UN00000376282 08/12/05-80003-012 550.00