

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000023737

FILED
Feb 26, 2008
Secretary of State

Entity Name: CARRIER EQUIPMENT, INC.

Current Principal Place of Business:

915 MIDDLE RIVER DR
STE 414
FORT LAUDERDALE, FL 333043561 US

New Principal Place of Business:

Current Mailing Address:

915 MIDDLE RIVER DR
STE 414
FORT LAUDERDALE, FL 333043561 US

New Mailing Address:

FEI Number: 65-0489267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSBY, BYRON A
915 MIDDLE RIVER DR
STE 414
FORT LAUDERDALE, FL 333043561 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: BUSBY, FRANCES B
Address: 2025 SUNRISE KEY BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VPD () Delete
Name: BUSBY, BYRON A
Address: 2733 NE 34TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: D (X) Delete
Name: BUSBY, BYRON A
Address: 2733 NE 34TH ST
City-St-Zip: FORT LAUDERDALE, FL 33306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BYRON A. BUSBY

VPD

02/26/2008

Electronic Signature of Signing Officer or Director

_____ Date