

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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95 MAY -1 AM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000035821 (5)

1. Corporate Name
CAROM INC.

Principal Place of Business

Maining Address

**3451 QUEENS ST #225
SARASOTA FL 34231**

**3451 QUEENS ST #225
SARASOTA FL 34231**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification
05/12/1984

3a. Date of Last Report

2. Principal Office and Mailing

2a. Mailing Address

21

26

4. FFI Number
65-0490537

Applied For
Not Applicable

State Apt # etc

State Apt # etc

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

6. This corporation has liability for intangible tax under § 199(3)(f),
Florida Statutes Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GOLDSMITH, STANLEY A
1605 MAIN ST
SUITE 1001
SARASOTA FL 34238**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or registered agent

Signature of registered agent or registered agent

Date

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

D

1.1 TITLE

Change Addition

2. NAME

GARDNER, ALEXANDER M

1.2 NAME

3. STREET ADDRESS

3451 QUEENS ST #225

1.3 STREET ADDRESS

4. CITY, ST, ZIP

SARASOTA FL 34231

1.4 CITY, ST, ZIP

Change Addition

5. TITLE

2.1 TITLE

6. NAME

2.2 NAME

7. STREET ADDRESS

2.3 STREET ADDRESS

8. CITY, ST, ZIP

2.4 CITY, ST, ZIP

Change Addition

9. TITLE

3.1 TITLE

10. NAME

3.2 NAME

11. STREET ADDRESS

3.3 STREET ADDRESS

12. CITY, ST, ZIP

3.4 CITY, ST, ZIP

Change Addition

13. TITLE

4.1 TITLE

14. NAME

4.2 NAME

15. STREET ADDRESS

4.3 STREET ADDRESS

16. CITY, ST, ZIP

4.4 CITY, ST, ZIP

Change Addition

17. TITLE

5.1 TITLE

18. NAME

5.2 NAME

19. STREET ADDRESS

5.3 STREET ADDRESS

20. CITY, ST, ZIP

5.4 CITY, ST, ZIP

Change Addition

21. TITLE

6.1 TITLE

22. NAME

6.2 NAME

23. STREET ADDRESS

6.3 STREET ADDRESS

24. CITY, ST, ZIP

6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199(3)(g), Florida Statutes. I further certify that the information included 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 or personal or executor of the estate of the corporation or the receiver of the corporation, and that my name appears in Block 12 or Block 13, unchanged, or as an attachment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/95

(812) 922-6720