

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000039385 (7)**

1. Corporation Name

CARLA INFANTE, INC.



Principal Place of Business

Mailing Address

**916 NE 20TH AVE
FT LAUDERDALE FL 33304
US**

**916 N.E. 20TH AVE.
FT LAUDERDALE FL 33301**

2. Principal Place of Business

2a. Mailing Address

21. State - Apt #, etc

26. 916 NE 20th Ave

22. City & State

27. State - Apt #, etc

23. Zip

Country

28. Ft. Laud. Florida

24. Zip

25. Country

29. 33304

30. USA

9. Name and Address of Current Registered Agent

**INFANTE, CARLA
916 NE 20TH AVE
FT LAUDERDALE FL 33304**

3. Date Incorporated or Qualified

05/20/1994

3a. Date of Last Report

02/14/1995

4. FET Number

65-0493884

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

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

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 607.1305, 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 Officer or Director

Signature of Registered Agent or Officer or Director

Date

12. OFFICERS AND DIRECTORS

12.1

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.2

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.3

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.4

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.5

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.6

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.7

NAME

STREET ADDRESS

CITY - STATE - ZIP

12.8

NAME

STREET ADDRESS

CITY - STATE - ZIP

13.

13.1

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13.15

NAME

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**INFANTE, CARLA
1414 NE 16th Ave.
Ft. Laud. FL 33304**

☒ Change ☐ Addition
address only

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-96 954-467-0701

CR2E034 (12/95)