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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000039385

CARLA INFANTE, INC.

Principal Place	e of Business	Mailing Address					
1881 NE 26TH S	ST.	1881 NE 26TH ST.					
STE #60 BOX A-7		STE #60 BOX A-7		DO NOT WRITE IN THIS SPACE			
WILTON MANOR		WILTON MANORS FL 33305			DO NOT WRITE IN	THIS SPACE	
US		US			Date Incorporated or Qualified		
•					05/20/1994		i
		La Barilla Address			4. FEI Number	Apr	olied For
2. Principal Pla	ace of Business	2a. Mailing Address			1	 -	Applicable
21					65-0493884		
Suite, Apt. /	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
- 7		27			5. Certificate of diction provides	Fee Rec	quired
22		City & State			6. Election Campaign Financing	\$5.00	Mav Be
City & State	В	<u>⊢</u> ¬ '			Trust Fund Contribution	Added to	,
23		28					
Zip	Country	Zip	Coun	ıry	8. This corporation owes the current y		⊠ No.
24	25	29	30		Personal Property Tax.		ATINO.
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regis	stered Agent	
	J. Harrie and Harris			81 Name			
INICA	NTE, CARLA			_			
		Γ	82 Street Add	Iress (P.O. Box Number is Not Acceptable)		1	
1881	NE 26TH ST.		i		3 - 44 - 135 - 27 - 37 - 38 - 27	44 0 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	free St. Com.
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11 Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the ab	ove-named corp	poration submits this statement for the purp	annointment as rec	nistered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was au	ithorized ida Statu	by the corporati	poration submits this statement for the purpion's board of directors. I hereby accept the	o appointment do 14;	
agent. I a	m familiar with, and accept the oblig-	ations of, Section 607.0303, 1100	un Olalu				
SIGNATURE					red when reinstating))	DATE	
	Signature, typed or printed name of registered ago			agent signature requir	ADDITIONS/CHANGES TO OFFICE		RS IN 12
12.	OFFICERS A	ND DIRECTORS	13.			Change	Addition
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	HALLMALE COMPET						
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	1414 NE 16TH AVENUE			REET ADDRESS			ļ
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90059 010 ***150.00