2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P94000065594 1. Entity Name					Secretary of State				
CARANT,	INC.						·		
Principal Place of Business		_ Mailing Address							
LAKE WORTH 717 LAKE AVE LAKE WORTH FL 33460		LAKE WORTH 717 LAKE AVE LAKE WORTH FL 33460							
2. Principal Place of Business		3. Mailing Address		{	an na 1911 airi ban				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)					
City & State		City & State			4. FEI Numbe	65-056212	4		plied Far t Applicat
Zip	Country	Zip	Country		5. Certificate	of Status Desired		75 Add Required	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New I		<u>-</u>	
ATLA OF BEET			Na	ame					
717	A, GILBERT LAKE AVENUE IE WORTH FL 33460		Sti	Street Address (P.O. Box		er is Not Acceptabl	le)		
			C	ity			FL	Zip Code	=
	named entity submits this statement for nons of registered agent.	or the purpose of changing its	registered of	fice or register	ed agent, or bot	h, in the State of Fi	orida, Lam fami	iar with,	and accep
SIGNATURE .	Signature, typed or printing name of registered agent	and life if applicable (NOSE.	, Registered Agen	nt signature required	when re-nstating)		DATE		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00 Payable to Florida Department of	(State	J			9. Election Camp Trust Fund Co.			00 May :
10.	OFFICERS AND	5 25°-1 5 52L	11.		ADDITIONS/	CHANGES TO OF	FICERS AND DIF	ECTORS	S IN 11
TITLE NAME	OP CELA, GILBERT	☐ Detete	TITLE NAME			U000004	173857	Change	☐ Aikim
STREET ADDRESS	1905 FITTIN COURT		STREET ADE	,		04/03/06-9	30001-015	150.	00
CITY-SI-ZIP	LAKE WORTH FL 33461	·	CITY-ST-ZI	IP				C*	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CELA, GINETTE 1905 FITTIN COURT LAKE WORTH FL 33461	Colele	TITLE NAME STREET ACC CITY-ST-ZI				u	Change	∏ Automa
TIFLE NAME STREET ADDRESS CITY-ST-TIP	T CELA, MARC 1605 S. PALM WAY LAKE WORTH FL 33460	☐ Delete	Title Name Street add City-St-Zi					Change	□ /#**
CILE NAME STREET AODRESS CITY-ST-ZIP	S CELA, CAROLE 3905 CAROLINA DRIVE LAKE WORTH FL 33461	☐ Delete	TITLE NAME STREET ADD CHY-ST-ZA	1				Change	□ Adyni
TITLE NAME STREET ADDRESS GITY: 57- ZP		☐ Delete	TITLE NAME SIREET ADD	ORESS				Change	☐ Adam.
TITLE NAME STREET ADDRESS CITY-SI-ZIP		□ Oelete	TITLE NAME STREET ADO CITY-ST-21	ORESS				Change	□ ACC

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHBERT CELA PRISIDENT 03/606 56/5827666