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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P95000001227 (4)

CARP	ET COLORS, INC.	`	,				
Principal Place of Business Mailing Address							HOUR CORES COOK COOK AND
2313 SE OC STUART FL		2313 SE OCEAN BL Stuart FL 34996	VD				
					3. Date Incorporated or Qualified 01/04/1995	3a. Date of	Last Report
	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	# etc	26			65-05600	12	Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional
City & Stat	le	City & State			6. Election Campaign Financing		Fee Required
23		28			Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zφ	Country		8. This corporation has liability to	intangible tax u	
24	25 9. Name and Address of Cur	29	30		Florida Statutes Ye	s 🗌 No	
	9, Ivanie and Address of Cur	rent Hegistered Agent	81	Name	10. Name and Address of New	Registered Ag	ent
STEWART, GERALD 2313 SE OCEAN BLVD STUART FL 34996					ess (P.O. Box Number is Not Accepta	ble)	
			<u> </u>	Crty			35 Zip Code
11. Pursuant or register familiar wi	ith, and accept the obligations of, Se	ection 607.0505, Florida Statuti	ites, the above no zeo by the corpor es.	nmed corpora ration's board	ition submits this statement for the pu d of directors. Thereby accept the app	rpose of changi pointment as reg	ng its registered office istered agent. I am
12.	Signative, typica or productionancy of registred 4.		IOTE Buy and LAgorie	Signature reduced		DATE	
TIFLE	PSD	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OF		·
NAME	STEWART, GERALD		1 1 TIELE 12 NAME				Change 🔲 Addition 📙
STREET ADDRESS	1417 SW 24 LANE		1.3 STREET A	nnecce			
CITY-ST-ZIP	PALM CITY FL 34990		1.4 CHY-SE-				{!
TITLE	DELETE		2.1 Tif. E			hange Addition	
NAMÉ			2.2 NAME			_ ·	, and a manager
STREET ADDRESS			23 STREET AL	DDAESS			
CITY - ST - ZIP			24017-51	ZIF			
TITLE		☐ DELETE	3 1 TIJLE				hange 🔲 Addition
NAME			3.2 NAME	ĺ	•		
STREET ADDRESS			3.3 STREET A	DORESS			
CITY-ST-ZIP TITLE		DELETE	34 CITY - ST-	ZIP		·-·-	
NAME		[] beceie	4 1 TITLE	1		c	hange 🗌 Addition
STREET ADDRESS			4.2 NAME				
CITY - ST - ZIP			4.3 STHEET AC				İ
TITLE		☐ DELETE	4 4 CITY - ST 5 1 TITLE	20°			hages [7] Addition
NAME			5.2 NAME				hange 🗌 Addition
STREE: ADDRESS			53 SHEET AD	ine: ss			
CHTY - ST - ZIP			5 4 CHY - ST-3				
TITLE		☐ DEL€ FE	6 1 Tille	·=			nange Addition
NAME			6.2 NAME				.∞.9∞ E3 Addution
STREET ADDRESS			6.3 STREET AD	IORESS			
				1			

SIGNATURE:

SIGNING OFFICER OR DIRECTOR STEWART 4-10-96 704-665-0240 SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliementa arinual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if granged, or or at attaching in within an advices.