

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012098

Entity Name: NORTH CAROLINA DREAMS, INC.

FILED  
Apr 09, 2009  
Secretary of State

## Current Principal Place of Business:

900 W. 49TH STREET  
#418  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

900 W. 49TH STREET  
#418  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 65-0564957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARAMIS, LOPEZ JR.  
900 W. 49TH STREET  
STE #418  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LOPEZ, ARAMIS JR.  
Address: 8861 N.W. 196TH STREET  
City-St-Zip: HIALEAH, FL 33018

Title: D ( ) Delete  
Name: LOPEZ, ARAMIS SR.  
Address: 8902 N.W. 189TH TERRACE  
City-St-Zip: HIALEAH, FL 33018

Title: VSD ( ) Delete  
Name: BERRIN, ROBERT G  
Address: 4601 PONCE DE LEON BLVD., #300  
City-St-Zip: MIAMI, FL 33146

Title: D ( ) Delete  
Name: FISHER, ISAAC K.  
Address: 5881 SW 105TH ST.  
City-St-Zip: MIAMI, FL 33164

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARAMIS LOPEZ JR

PTD

04/09/2009

Electronic Signature of Signing Officer or Director

Date