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 #
1. Corporation Name

P95000044616 (7)

CARNEGIE MANAGEMENT, INC.

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Principal Plac	e of Business	3	М	a'ling Address					KILL MAIKI MAINI MA	YO BIRKI BERM BIN)	
118 LAKE EMERALD DRIVE APT 208 OAKLAND PARK FL 33309				118 LAKE EMERALD DRIVE APT 208 OAKLAND PARK FL 33309								
		# #** about						3. Date incorporated or Qua 06/09/1995	alified 3a. I	Date of Last R	eport	
2. Principal Place of Business			F 1 - 1	2a. Mailing Address				4. FEI Number			Applied For	
21 3848 Coral Tree Circle			26					65-0592135			Not Applicable	
Suite, Apt. #, etc.			27					5. Certificate of Status Desir		\$8.75 Additional Fee Required		
City & State Coconut Creek, FL			28	City & State Coconut Creek, FL				6. Election Campaign Finant Trust Fund Contribution	cing 🔲	\$5.00 May Be Added to Fees		
Zip 33073	}	Country 25 USA	29	^{Zip} 33073		untry USA		This corporation has liabi Florida Statutes [lity for intangib X Yes \ \ \ \ No		199.032,	
	9. Name	and Address of Cu	rrent Regis	tered Agent				10. Name and Address of	New Register	red Agent		
						81 Nami	e					
CARNE	EGIE, PAUL	A				82 Stree	t Addres	ss (P.O. Box Number is Not Ac	centable)			
118 LAKE EMERALD DRIVE APT 208				38			48 Cc	oral Tree Circle	l			
OAKLA	ND PARK	FL 33309				83						
						84 City				OE 7	p Code	
						~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	conut	Creek	F	-L 1	33073	
or registe	ered agent, or	ions of Sections 607.0 r both, in the State of F ipt the obligations of, S	Krida, Such	h change was autho	orized by the			ion submits this statement for of directors. Thereby accept the	the purpose of ne appointmen	changing its r it as registered	egistered office Lagent. Lam	
SIGNATURE												
	Signature, typoc	or printed name of registered a		100 6 49 111 100 100 100 100 100 100 100 100 10	(NOTE Registere		e recrired w		DAT			
12.		OFFICERS	AND DIF.E (13.			ADDITIONS/CHANGES T	O OFFICERS A			
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I. I do 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECOR

4-30-96 (954) 970-9072

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