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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000045187

1. Corporation Name

CARTERIS PROPILCE INC

Principal Place of Business	Mailing Address	
4106 SOUTH EDWARDS ROAD PLANT CITY FL 33567	4106 SOUTH EDWARDS ROAD PLANT CITY FL 33567	1

FILED Feb 17, 1999 8:00am **Secretary of State**

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Principal Place	e of Business	Mailing Address					MATER MATERIA MATERIA MATERIA AND AND AND AND AND AND AND AND AND AN	E INDIA ERRI INNE	
4106 SOUTH EDWARDS ROAD PLANT CITY FL 33567			4106 SOUTH EDWARDS ROAD			,			
						DO NOT WRITE I	N THIS SPACE		
						3. Date Incorporated or Qualifed 06/12/1995			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	A	pplied For	ج [
21		26				59-3323394	N	ot Applicable	5
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	₇ \$8.75	Additional	} *:
22		27				J. Comments of States Besides	Fee R	equired	1
City & Stat	te	City & State				6. Election Campaign Financing	1	May Be	ĺ
23		28				Trust Fund Contribution	Added	to Fees	ļ
Zip	Country	Zip		ountry		8. This corporation owes the current	• • •		
24	9, Name and Address of Curr	29	30		•	Personal Property Tax. 10. Name and Address of New Regi	TZYes	□No	ł
	9. Name and Address of Curi	rent Aegistered Agent		81	Name	10, Name and Address of New Kegi	stered Agent	•	ł
CAR	ITER, BARBARA				· · · · · · · · · · · · · · · · · · ·	•			
	6 S. EDWARDS ROAD			82	Street Addre	ess (P.O. Box Number is Not Acceptable))		1
PLAI	NT CITY FL 33567			83			Total State of the	:: 10 to 15	1
							對機器。結構	13 (4) 數	
	•			84	City	7. 7. 18 11 8. 8	FL 85 Zip	Code	ì
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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 empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 12 or Block 13 or on an atjachment with an address, with all pther like expowered.

SIGNATURE: