FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053806 (2)

CARPENTER PLUS, INC.

Principal Place of Business Mailing Address							_		-	19111 0011	H BITOO HIIDI IDIAL OO	ILU EIN IMM
2032 SW 81ST WAY 2032 SW 81ST WAY DAVIE FL 33324 DAVIE FL 33324-5440												
									3. Date Incorporated or Qualifi 07/10/1995	ed 3	a. Date of Last 05/01/1996	Report
2. Principal P	lace of Busin	988	2a	2a. Mailing Address					4. FEI Number	•		Applied For
Suite, Apt.	# oto		26	Suite, Apt #, etc.					65-0598870			Not Applicable
22			27	27					5. Certificate of Status Desired			Additional Required
City & Stat	Country	28						Election Campaign Financing Trust Fund Contribution	g _		May Be to Fees	
	Zip		ļ_,	Zip	—	Dountry	,		8. This corporation has liability			s. 199.032
24 25 21 9, Name and Address of Current Reg								Florida Statutes Yes No				
040			irrent Hegis	itered Agent		81	T .		10. Name and Address of New	Registe	ered Agent	
BASANTA, MARY						81 Name						
5520 SW 164TH TERRACE FORT LAUDERDALE FL 33331							S	treet Addre	ss (P.O. Box Number is Not Acce	otable)		
ron	II DAODENI	ALE FE 30001				83						
4.0												
						84	C	City			85 Zip	Code
11. Pursuant	to the provisi	ons of Sections 607	.0502 and 6	07.1508, Fforid	la Statutes, the	above	e-na	amed corpo	pration submits this statement for the	ne nurno	nse of changing	ite ranietaran
office or r	registered ag	ent, or both, in the S	State of Flori	da Such chang	ge was author	ized by	y thi	e corporation	oration submits this statement for the one is board of directors. I hereby ac	cept the	appointment a	s registered
I		in, and decept the t	migations c	i, decilori coz.c	osos, rionda c	วเสเนเยง	5.					
SIGNATURE	Signature, typed	or printed name of registers	ed agent and tile	з я аррісав'е.	(NOTE: Regis	tpred Age	ent si	ignature require	d when reinstating)	D,	Alt	
12.		OFFICE RS	AND DIRE	CTORS	1	3.			ADDITIONS/CHANGES TO OF	FICERS	AND DIRECTO	RS IN 12
TITLE	P	NIA BELLI		☐ DE	LETE 1.	1 TITLE					☐ Change	Addition
NAME NAPOLITANO, DEAN STREET ADDRESS 2032 SW 81ST WAY				1.2 NAME								
STREET ADDRESS		1.3 S			3 STREET	ADD	IRESS					
CITY-ST-ZIP	DAVIE FL	33324				4 CHY-S	i] - Zł	Р		·		
TITLE	V NADOLITA	LNO IANIOE		∐ DEI	LETE 2.	1 111116					L Change	Addition
NAME	NAPOLITANO, JANICE 1660 ESTATE CIR.			5.5								
STREET ADDRESS		ATE CIR. LE IL 60565			2	3 STRFFT	ADD	RESS				
CITY-ST-ZIP TITLE	INDERVI	TE IL 00303				4 CITY - S	S1 - Z	IP .				
				∐ DEI	1	1 TITLE					∐ Change	Addition
NAME OTREET ARRESON						2 NAME						
STREET ADDRESS					•	3 \$1REET						
CITY-ST-ZIP TITLE	 -			DEC		4. CITY - S 1 TITLE	S1 - Z	iP			Channe	Addit-
NAME						P NAME					Change	Addition
STREET ADDRESS							4 Eve	,n, co				
CITY-ST-ZIP					1	3 STREET						
TITLE				DLU		4 CITY - S 1 TITLE	1 - 211	<u> </u>			Change	Addition
NAME						2 NAME					Onlings	
STREET ADDRESS						3 STREET	£DD.	BECC				
CITY-ST-ZIP					ľ	4 CITY-S						
TITLE				DEL		1 TITLE	. (1)				Change	Addition
NAME						2 NAME						
STREET ADDRESS						3 STREET	ADD	RESS				
CITY-ST-ZIP						4 CITY-S						

4. I do 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 eath; 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.

CICMATURE.

Denderal all

4-74-97 (054)/80-0501

FILED

May 02 1997 8:00am

Secretary of State