

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000054840

1. Entity Name

B. CARSON ENTERPRISES, INC.



Principal Place of Business

3800 GALT OCEAN DRIVE, #703
FT. LAUDERDALE, FL 33308

Mailing Address

3800 GALT OCEAN DRIVE, #703
FT. LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE



03142005

No Chg-P

CR2E034 (10/03)

4. FEI Number

65-0578376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARSON, BRADLEY F
3800 GALT OCEAN DRIVE, #703
FT. LAUDERDALE, FL 33308

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CARSON, BRADLEY F
STREET ADDRESS	3800 GALT OCEAN DRIVE, #703
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308
TITLE	PST
NAME	CARSON, BRADLEY F.
STREET ADDRESS	3800 GALT OCEAN DRIVE #703
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/16/05-80024-016 150.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bradley F. Carson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-05 914-565-3844
Date Daytime Phone #