

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000060990

Entity Name: CAROLINA INVESTMENT GROUP, INC.

FILED  
Apr 02, 2005  
Secretary of State

## Current Principal Place of Business:

PO BOX 140447  
CORAL GABLES, FL 331140447

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 140447  
CORAL GABLES, FL 331140447

## New Mailing Address:

FEI Number: 65-0605039

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAPNER, HERMAN  
119 AVILA CT  
CORAL GABLES, FL 33134 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: DPT ( ) Delete  
Name: RUBIN, JUDY  
Address: 119 AVILA CT.  
City-St-Zip: CORAL GABLES, FL 33134

Title: DVS ( ) Delete  
Name: RUBIN, ROBERT M  
Address: 400 N. CHURCH ST. #409  
City-St-Zip: CHARLOTTE, NC 28202

Title: DV ( ) Delete  
Name: RUBIN, RICHARD  
Address: 5731 LODGE CREEK DRIVE  
City-St-Zip: HOUSTON, TX 77066

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DV (X) Change ( ) Addition  
Name: RUBIN, RICHARD  
Address: 14318 FLORET ESTATES COURT  
City-St-Zip: CYPRESS, TX 77429

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUDY RUBIN

PRES

04/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date