

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000062575 (2)

1. Corporation Name

CARAVA GROUP, INC.



Principal Place of Business

Mailing Address

~~663 WATERMILL DRIVE
MERRITT ISLAND FL 32952~~

~~764 WATERMILL DRIVE
MERRITT ISLAND FL 32952~~

663 Deerhurst Dr.
Melbourne, FL 32940

663 Deerhurst Dr.
Melbourne, FL 32940

3. Date Incorporated or Qualified
08/11/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Same as above

26 Same as above

4. FEI Number

Applied For

593325798

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPENCER, DAVID B
764 WATERMILL DRIVE
MERRITT ISLAND FL 32952

See new Address
Above.

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

David B. Spencer, Pres. DAVID B. SPENCER

DATE

5/12/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D PRESIDENT	SPENCER, DAVID B	764 WATERMILL DRIVE	MERRITT ISLAND FL 32952	<input type="checkbox"/>
Vice President	Virginia S. Spencer	Same Address as above.		<input type="checkbox"/>
TREASURER	Ralph E. Spencer	Same Address		<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. 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:

Ralph E. Spencer, Treas.
RALPH E. SPENCER, Treas.

May 12, 1996 (407) 254-1346

CR2E034 (12/95)