

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000065118 (8)

1. Corporation Name

CARAVELL VENTURES, INC.

Principal Place of Business

6731 15TH ST E
SARASOTA FL 34243
US

Mailing Address

1605 MAIN STREET, SUITE 1001
SARASOTA FL 34236

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 P.O. Box 242

Suite, Apt. #, etc.

27 City & State

28 Longboat Key FL.
29 34228 30 U.S.A.

9. Name and Address of Current Registered Agent

GOLDSMITH, STANLEY A
1605 MAIN STREET, SUITE 1001
SARASOTA FL 34236

3. Date Incorporated or Qualified

08/23/1995

3a. Date of Last Report

04/22/1996

4. FEI Number

65-0602691

Applied For

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

Robert Havell

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

715 Dream Island Rd

83

84 City

Longboat Key

FL

85 Zip Code

34228

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

SEC. STANLEY A. GOLDSMITH ROBERT HAVELL 7-30-97

12. OFFICERS AND DIRECTORS

TITLE D
NAME HAVELL, CAROL
STREET ADDRESS 1605 MAIN STREET, SUITE 1001
CITY-ST-ZIP SARASOTA FL 34236

TITLE D
NAME HAVELL, ROBERT
STREET ADDRESS 1605 MAIN STREET, SUITE 1001
CITY-ST-ZIP SARASOTA FL 34236

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 in an attachment with an address.

941-387-8813

FILED
Aug 07 1997 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E034 (4/97)