PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000072976

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90003 002 ***150.00

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CARACO, INC.					1001001100100101010101010101010101010101	: 86::: 86:B : 81: 18:::	3610 6 111 J 4 81
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Principal Place of Business Mailing Address			415				
VERO BEACH F	NDPOINTE LANE FL 32963	1624 WEST SANDPOINTE I VERO BEACH FL 32963	LANE		DO NOT WRITE IN	THIS SPACE	
	•				3. Date Incorporated or Qualifed	77110 017102	
					09/20/1995		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	App	olied For
21	•	26			65-0615905	Not	Applicable
Suite, Apt.	#, etc.	. Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Rec	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23	•	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	У	8. This corporation owes the current ye	ear Intangible	
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Regis	tered Agent	
DDA	DIEV CADOL M		81	Name			
1624	DLEY, CAROL M 4 West sandpointe lane		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	, ,,,	الترازي والمناط والما
VER	O BEACH FL 32963		83				# 1 1 d 2 d 1
			84	City		85 Zip C	ode
],		FL	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the abov	e-named corp	oration submits this statement for the purpo on's board of directors. I hereby accept the	ose of changing its	registered
	egistered agent, or both, in the State	of Florida, Such change was a	ULITOTIZEU DY			appointment as reg	,
agent. I a	im familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes	S.	•		
agent, I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes	S.			
agent, I ai	m familiar with, and accept the obligation of th	ations of, Section 607.0505, Floi int and title if applicable. (NOTE	rida Statutes : Registered Age	S.	d when reinstating)	ATE	· · · · · · · · · · · · · · · · · · ·
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14. 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 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, with all other like empowered.

SIGNATURE:

Carol M. Bradley President

561-231-6646