FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000089115

1. Corporation Name

Principal Place of Business

THE CARMEN GEORGINA CORPORATION

6821 SW 147TH AVENUE 6821 SW 147TH AVENUE APT. 2E APT. 2E						DO NOT WRITE IN THIS SPACE				
MIAMI FL 33193	1	MIAMI FL 33193				3. Date Incorporated or Qualifed 11/20/1995	IS SEA	<u> </u>		
5 Principal D	ace of Business	2a. Mailing Address				4. FEI Number		An	olied For	
<u>~</u> i	ace of business	26 Za. Walling Address				65-0628525			Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.							dditional	
22	.,	27				5. Certificate of Status Desired	·	Fee Re	quired	
City & State	e'	City & State	-52902	-		6. Election Campaign Financing Trust Fund Contribution	•	5.00 Added to		
23 Zip	Country	Zip	Country	v		This corporation owes the current year				
29 30				Personal Property Tax.				□No		
	9. Name and Address of Current	1-1				10. Name and Address of New Registere	d Agen	et		
			81	ī	Name	•				
Weber, Eileen 922 n. Krome avenue			82	+	Street Addr	ddress (P.O. Box Number is Not Acceptable)				
MIAN	/II FL 33193		83	3						
			÷ 84	+	City		85	Zip C	ode	
			n the	_	named as	poration submits this statement for the purpose		ding ite	renistered	
office or re	egistered agent, or both, in the State om familiar with, and accept the obligati	f Florida. Such chande was au	ithorized by	, tr	he corporation	on's board of directors. I hereby accept the app	ointme	nt as reg	gistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Pagistared Age	nni e	ekoneture remuire	d when reinstating) DATE				
12.	OFFICERS AND		13.	,,,,,	angrinature require	ADDITIONS/CHANGES TO OFFICERS	AND DI	RECTO	RS IN 12	
TITLE (PD	DELETE	1.1 TITLE					Change	Addition	
NAME	SONNENBERG, HAROLD	_	1.2 NAME							
STREET ADDRESS	6821 SW 147TH AVENUE, APT.	2F	1.3 STREE	ΞTΑ	ADDRESS				}	
CITY-ST-ZIP	MIAMI FL 33193		1.4 CITY-5				•			
TITLE	PD	☐ DELETE	2.1 TITLE					Change	☐ Addition	
NAME	SONNENBERG, HAROLD		2.2 NAME							
STREET ADDRESS	6821 SW 147TH AVENUE, APT.	2F	2.3 STREE		ADDRESS					
. C/TY-ST-ZIP	MIAMI FL 33193	·	2.4 CITY-							
TITLE	, , , , , , , , , , , , , , , , , , ,	☐ DELETE	3.1 TITLE	<u></u>				Change	Addition	
NAME	. *.		3.2 NAME							
STREET ADDRESS	•		3.3 STREE	ΤA	ADDRESS				1	
CITY-ST-ZIP			3.4. CITY-		4					
TITLE		[] DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME	:						
STREET ADDRESS			4.3 STREE	ET A	ADDRESS					
CITY-ST-ZIP	Y ₄ ,		4.4 CITY-S	ST-	.ZIP				ļ	
TITLE		☐ DELETE	5.1 TITLE	-		-		Change	☐ Addition	
NAME		•	5.2 NAME				•			
STREET ADDRESS			5.3 STREE	ET A	ADDRESS	·				
CITY-ST-ZIP			5.4 CITY-5	ST-	ZIP				ļ	
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition	
NAME			62 NAME							
STREET ADDRESS			6.3 STREE	ΤA	ADDRESS				1	

CITY-ST-ZIP 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.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90026 046 ***150.00