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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POGOGOGAAGS

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90214 011 \*\*\*150.00

<ol> <li>Corporation</li> </ol>	Name	004400					
CARNOTEL, INC.							
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Oringinal Place	of Pusiness	Mailing Address			<u> </u>	BBHH BHBH BHBH	I OCHCO ANN HOST
230 WESTWARD DRIVE 230 WESTWARD DRIVE MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166							
MIAMI STRINGS PL 33100 MIAMI STRINGS PL 33100				. DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
					01/16/1996		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Ap	oplied For
21		26			65-0639407	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<u>\$8.75</u>	Additional
22	27				- 3. Certificate of Status Desired	Fee Re	equired
	City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Count	гу	8. This corporation owes the current year Int	tangible	
24	25	293	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
•			8	1 Name			
	ERIO, MARK V		8	2 Street Addr	Iress (P.O. Box Number is Not Acceptable)		
44 W. FLAGLER STREET							
	E 2450/COURTHOUSE TOWER		8	3			1
MIAN	M FL 33130		-	4 City		85 Zip	Code
					FL	<u>.</u>   `	[
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the abo	ve-named corp	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	changing its	registered
office or re	egistered agent, or both, in the State of n familiar with, and accept the obligation	f Florida. Such change was aut ons of, Section 607,0505, Florid	thorized b da Statute	y the corporate	on's board of directors. I hereby accept the appoi	inument as re	egistered
	ir farmina. With and accept the opingant	3,10 3,1 55343,1 557,1555, 1 1 1 1					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature req							
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Ag	ent signature require			
	Signature, typed or printed name of registered agent of OFFICERS AND		Registered Ag	ent signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN		
	<u> </u>					ND DIRECTO	DRS IN 12
12.	OFFICERS AND	DIRECTORS DELETE	13.				
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME				
12. TITLE NAME	OFFICERS AND DP FERNANDEZ-GUZMAN, CARLOS	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME	ET ADDRESS		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS	OFFICERS AND DP FERNANDEZ-GUZMAN, CARLOS 230 WESTWARD DRIVE	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE	ET ADDRESS ST-ZIP			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DP FERNANDEZ-GUZMAN, CARLOS 230 WESTWARD DRIVE MIAMI SPRINGS FL 33166	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY	ET ADDRESS ST-ZIP		☐ Change	☐ Addition
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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.

6.4 CITY-ST-ZIP

SIGNATURE: