

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000017836

Entity Name: CAREY ELEVATOR, INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

6700 GRIFFIN ROAD  
J  
DAVIE, FL 33314 US

## New Principal Place of Business:

5881 SW 21 STREET  
HOLLYWOOD, FL 330233008 US

## Current Mailing Address:

6700 GRIFFIN ROAD  
J  
DAVIE, FL 33314 US

## New Mailing Address:

5881 SW 21 STREET  
HOLLYWOOD, FL 330233008 US

FEI Number: 65-0641392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAREY, DANIEL L  
1602 S.W. 159TH AVENUE  
DAVIE, FL 33326 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: CAREY, DANIEL  
Address: 6700 GRIFFIN ROAD  
City-St-Zip: DAVIE, FL 33314 US

Title: DV ( ) Delete  
Name: CAREY, DANIEL  
Address: 6700 GRIFFIN ROAD  
City-St-Zip: DAVIE, FL 33314 US

Title: DP ( ) Delete  
Name: CAREY, MICHELLE  
Address: 6700 GRIFFIN ROAD  
City-St-Zip: DAVIE, FL 33314 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL CAREY

DV

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date