


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000026113	
1. Entity Name CARSO OF BROWARD, INC.	

Principal Place of Business 7604 S.W. 8TH STREET NORTH LAUDERDALE, FL 33068	Mailing Address 7604 S.W. 8TH STREET NORTH LAUDERDALE, FL 33068
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**DO NOT WRITE IN THIS SPACE**

01292004 No Chg-P CR2E034 (10/03)

4. FET Number 65-0822196	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  CARRILLO, CARLOS 7604 S.W. 8TH STREET NORTH LAUDERDALE, FL 33068
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**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature must be provided with or registered agent or authorized officer. I.C.F. Registered Agent's signature required when re-statuting.

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be</b> <b>Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD CARRILLO, CARLOS 7604 S.W. 8TH STREET NORTH LAUDERDALE, FL 33068
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:  **PRESIDENT** 04/26/04 (954) 720-5660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Carline Phone #