

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

FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000066680 (5)
1. Corporation Name
CARNELL, INC.



Principal Place of Business

Mailing Address

4020 CORAL SPRINGS DR.
CORAL SPRINGS FL 33065

4020 CORAL SPRINGS DR.
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/12/1996

4. FEI Number

65-0685268

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 4841 N.W. 19 ST

26 4841 N.W. 19 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 COCONUT CREEK, FL

28 COCONUT CREEK, FL

24 Zip

25 Country

29 Zip

30 Country

33063

USA

33063

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CERNA, NELLY
4020 CORAL SPRINGS DR.
CORAL SPRINGS FL 33065

81 Name

CERNA, NELLY

82 Street Address (P.O. Box Number is Not Acceptable)

4841 N.W. 19 ST

83

84 City

COCONUT CREEK

FL

85 Zip Code

33063

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME CERNA, NELLY
STREET ADDRESS 4020 CORAL SPRINGS DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME CERNA, NELLY
1.3 STREET ADDRESS 4841 N.W. 19 ST
1.4 CITY-ST-ZIP COCONUT CREEK, FL 33063

TITLE D ☒ DELETE
NAME CERNA, CARLOS
STREET ADDRESS 4020 CORAL SPRINGS DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME CERNA, CARLOS
2.3 STREET ADDRESS 4841 N.W. 19 ST
2.4 CITY-ST-ZIP COCONUT CREEK, FL 33063

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

CR2E034 (10/97)