

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

FILED
Apr 10 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 # P97000084810 (5)

1. Corporation Name

CARRY-ME CRITTERS, INC.



Principal Place of Business

Mailing Address

4630 SOUTH KIRKMAN ROAD
SUITE 367
ORLANDO FL 32811

4630 SOUTH KIRKMAN ROAD
SUITE 367
ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1997

4. FEI Number

59-3501184

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

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARI, BEVERLEY A
4630 SOUTH KIRKMAN ROAD
SUITE 367
ORLANDO FL 32811

81 Name

N/A

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

83

84 City

FL

85 Zip Code

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	PRESIDENT	☐ DELETE
NAME	BEVERLEY A. HARI	
STREET ADDRESS	4630 S. KIRKMAN ROAD, STE. 367	
CITY-ST-ZIP	ORLANDO, FL 32811	
TITLE	SECRETARY	☐ DELETE
NAME	BEVERLEY A. HARI	
STREET ADDRESS	AS ABOVE	
CITY-ST-ZIP		
TITLE	TREASURER	☐ DELETE
NAME	BEVERLEY A. HARI	
STREET ADDRESS	AS ABOVE	
CITY-ST-ZIP		
TITLE	CHAIRMAN	☐ DELETE
NAME	BEVERLEY A. HARI	
STREET ADDRESS	AS ABOVE	
CITY-ST-ZIP		
TITLE	DIRECTOR	☐ DELETE
NAME	BEVERLEY A. HARI	
STREET ADDRESS	AS ABOVE	
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	600002486825
4.3 STREET ADDRESS	-04/13/98-01080-030
4.4 CITY-ST-ZIP	***150.00
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	600002486825
5.3 STREET ADDRESS	-04/13/98-01080-031
5.4 CITY-ST-ZIP	***8.75
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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.

SIGNATURE

FE
4/10