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 # P98000010051

1. Corporation Name

CARVIS HALLING INC

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90056 025 ***150.00

GAIT 5	FIAULING, INC.											
Principal Place of Business		Mailing Address					1 18 118 1 116 (B18) 1111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1)., 46 40			
5909 28TH AVENUE DRIVE EAST		5909 28TH AVENUE DRIVE EAST										
BRADENTON FL		BRADENTON FL 34208				Ì	DO NOT WRITE I	N THIS S	SDACE			
							<u>-</u> -		N ITIS	SPACE		1
							'	3. Date Incorporated or Qualifed 02/02/1998				-
2 Deineinal Di	and of Dunings	2a. Mailing Address					1. FEI Number-			pplied For	f	
— ·	ace of Business	26. Walling Audress					65 08 08 626			lot Applicable	1	
Suite, Apt.	# etc	Suite, Apt. #, etc.									Additional	1
	77, 010.	27					!	5. Certifcate of Status Desired	J		Required	
City & State	<u> </u>	City & State					5. Election Campaign Financing		\$5.00) May Be	1	
23	-	28				'	Trust Fund Contribution]		to Fees		
Zip	Country	Zip Country						8. This corporation owes the current	year Inta	ngible		1
24	25	29	[:	30			}	Personal Property Tax.		ŬYes	No	}
	9. Name and Address of Current						1	0. Name and Address of New Regi	stered A	gent	7]
					81	Name						
AME	RILAWYER			-	82	Stroot /	Address	(P.O. Box Number is Not Acceptable	,			┥
343	almeria avenue					Sireel	Addiess	(F.O. Box Number is Not Acceptable)	,			}
COR	AL GABLES FL 33134											1
				ļ		- 				Top Zin	Code	┨
					84	City			FL	85 Zip	Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Su	ch change was au	thorized	by t	the corpo	corporati oration's	ion submits this statement for the pur board of directors. I hereby accept th	pose of o e appoin	hanging it Iment as r	s registered egistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applica	ble. (NOTE:	Registered	Agent	t signature re	required whe		DATE			1
12.	OFFICERS AND	O DIRECTOR		13.				ADDITIONS/CHANGES TO OFFIC	ERS AND			-
TITLE	PSTD		☐ DELETE	1.1 TIT	LE					Change	→ Addition	
NAME	PARKS, GARY D			1.2 NA	ME							
STREET ADDRESS	5909 28TH AVENUE DRIVE EAS	iΤ		1.3 ST	REET	ADDRESS						[]
CITY-ST-ZIP	BRADENTON FL 34208			1.4 CIT	Y-ST	-ZIP						1
TITLE	V		DELETE	2.1 TIT	LΕ					☐ Change	Addition	
NAME	Stone, Brian L			2.2 NA	ME					_		
STREET ADDRESS	5909 28TH AVENUE DRIVE EAS	भ		2.3 ST	REET	ADDRESS						
CITY-ST-ZIP	BRADENTON FL 34208			2. 4 Cl	TY-S1	T-ZIP						-
TITLE	T		DELETE	3.1 TIT	LΕ					☐ Change	Addition	
NAME	CLARK, THOMAS K			3.2 NA	ME				•			1
STREET ADDRESS	5909 28TH AVENUE DRIVE EAS	ST .		3.3 ST	REET	ADDRESS						1
CITY-ST-ZIP	BRADENTON FL 32408			3.4. Cf		T-ZIP					— • 4.4%	-
TITLE			☐ DELETE	4.1 TIT						☐ Change	Addition	
NAME				4.2 N	AWE	ľ	ì					1
STREET ADDRESS				4.3 ST	REET	ADDRESS						
CITY-ST-ZIP				4.4 CT		-ZIP	<u> </u>					4
TITLE			☐ DELETE	5.1 TIT			ł			Change	Addition	
NAME				5.2 NA				•		•	,	•
STREET ADDRESS				1		ADDRESS	1					1
CITY-ST-ZIP				5.4 CIT		r-ZIP	 					+
TITLE			☐ DELETE	6.1 TT						☐ Change	Addition	1.
NAME	·			6.2 NA								ļ
STREET ADDRESS					6.3 STREET ADDRESS							}
CITY-ST-ZIP				6.4 CF	Y-ST	-ZIP	L					J

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 of 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.

SIGNATURE: 5

TED NAME OF SIGNING OFFICER OR DIRECTOR