

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000025126

1. Entity Name

CARNET, INC.

FILED

Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90035 034 ***150.00

Principal Place of Business

Mailing Address

1819 N DIXIE HWY
LAKEWATH FL 33480
US

1400 E OAKLAND PK BLVD
STE 100
OAKLAND PARK FL 33334-4400
US

2. Principal Place of Business

3. Mailing Address

2650 McCormick Dr.
Suite, Apt. #, etc.
Suite 185

2650 McCormick Dr.
Suite, Apt. #, etc.
Suite 185

City & State
Clearwater, FL

City & State
Clearwater, FL

Zip
33759

Country
USA

Zip
33759

Country
USA

4. FEI Number 65-0822701

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COVEN, DAVID A
2856 EAST OAKLAND PARK BLVD
FORT LAUDERDALE FL 33306

Name
Derri Davisson
Street Address (P.O. Box Number is Not Acceptable)
2650 McCormick Dr., Suite 185
Clearwater, FL
City FL Zip Code
33759

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.

SIGNATURE *Derri Davisson*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-29-00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARTINEZ, ENRIQUE
3031 NE 12TH TERRACE
OAKLAND PARK FL 33334 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Officer/Director
Derri Davisson
2650 McCormick Dr., Suite 185
Clearwater, FL 33759 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Officer/Director
J. Stephen Miller
2650 McCormick Dr., Suite 185
Clearwater, FL 33759 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: *Derri Davisson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-29-00 727-791-6801 X19

CR2E034 (9/99)