## 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** 

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

03-03-1999 90002 029 \*\*\*150.00

1. Corporation Name  CARLEM CORPORATION	0077793					
Principal Place of Business	Mailing Address		<del></del>	I INDIINDI 148 ININI 2014 MAII MAII MAII	+ 108) (480) II	1610 10100 11E1 1391
7610 MISTLETOE CT.	7610 MISTLETOE CT.					
ORLANDO FL 32807	ORLANDO FL 32807			DO NOT WRITE IN TUI	C CDACE	
				DO NOT WRITE IN THI  3. Date incorporated or Qualifed	3 SPACE	<del></del>
				09/04/1998		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21 2500 33RD STREET	kamara =			59-3531632		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional
22	27			5. Certificate of Status Desired	Fee	Required
City & State	City & State			6. Election Campaign Financing	•	00 May Be
23 ORLANDO FLORIDA	28			Trust Fund Contribution	Add	ed to Fees
Zip Country	Zip	Count	ry	8. This corporation owes the current year li		
24 32839 25 ORANGE		30		Personal Property Tax.	□Yes	□No
g. Name and Address of Curre	nt Registered Agent	8	1 Name	10. Name and Address of New Registered	a Agent	
MATHIEU, LOUIS A		ľ	THE THE		·	
7610 MISTLETOE CT. ' ORLANDO FL 32807		8	2 Street A	ddress (P.O. Box Number is Not Acceptable)		
		8	3			
		Ľ				
		8	4 City	F	85 Z	ip Code
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig- SIGNATURE Signature, typed or printed name of registered agent.	ations of, Section 607.0505, Flori	ida Statute	98.	ation's board of directors. I hereby accept the appropriate the appropriate (accept the appropriate accept the appropriate accept the appropriate (accept the appropriate accept the appropriate accept the appropriate accept the appropriate (accept the appropriate accept the appropriate accept the appropriate (accept the appropriate accept the appropriate accept the appropriate accept the appropriate (accept the appropriate accept the	omunent as	s registered
	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	☐ DELETE	1.1 TITLE	·	P/D	☐ Chan	
NAME		1.2 NAME	<b>.</b>   ;	MATHIEU, LOUIS A.		
STREET ADDRESS		1.3 STRE	ET ADDRESS	7610 MISTLETOE COURT		
CITY-ST-ZIP		1.4 CITY-	ST-ZIP	ORLANDO, FLORIDA 32807		
TITLE	☐ DELETE	2.1 TITLE		V/D	Chan	ge 🛣 Addition
NAME		2.2 NAM	- 1	MARKET THE TAGENOUS OF		
STREET ADDRESS			- 1	MATHIEU, JACINTH S.		
1		2.3 STRE		MATHIEU, JACINTH S. 7610 MISTLETOE COURT		
CITY- ST- ZIP	_	2. 4 CiTY	ET ADDRESS			(T) Addition
CITY-ST-ZIP TITLE	☐ DELETE	2. 4 City 3 1 TITLE	ET ADDRESS	7610 MISTLETOE COURT	☐ Chan	geAddition
	☐ DELETE	2. 4 City 3.1 TITLE 3.2 NAME	EET ADDRESS	7610 MISTLETOE COURT	Chan	geAddition
TITLE	☐ DELETE	2. 4 City 3.1 Title 3.2 NAME 3.3 STRE	EET ADDRESS	7610 MISTLETOE COURT	_	geAddition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		2. 4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY	EET ADDRESS	7610 MISTLETOE COURT		
TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE	☐ DELETE	2.4 City 3.1 Tifle 3.2 NAME 3.3 STRE 3.4. City 4.1 Tifle	EET ADDRESS  ST-ZIP  EET ADDRESS -ST-ZIP	7610 MISTLETOE COURT	_	
TITLE  NAME  STREET ADDRESS  CITY: ST- ZIP  TITLE  NAME		2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAME	EET ADDRESS  -ST-ZIP  E  EET ADDRESS -ST-ZIP  E	7610 MISTLETOE COURT		
TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS		2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	7610 MISTLETOE COURT		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY	EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS	7610 MISTLETOE COURT	☐ Chan	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		2.4 CITY 31 TITLE 32 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY 5.1 TITLE	EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS	7610 MISTLETOE COURT		ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	☐ DELETE	2. 4 CITY 3.1 TITLE 3.2 NAMM 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADORESS -ST-ZIP	7610 MISTLETOE COURT	☐ Chan	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	☐ DELETE	2. 4 CITY 3.1 TITLE 3.2 NAMM 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	EET ADDRESS - ST- ZIP - EET ADDRESS	7610 MISTLETOE COURT	☐ Chan	ge Addition

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR RRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/20/99.

(407) 872-0540