


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

05-30-2008 90216 007 ***150.00

DOCUMENT # P99000110267			
1. Entity Name CARL FINISHING, INC.			
Principal Place of Business 6278 SW 21 ST MIRAMAR, FL 33023		Mailing Address 6278 SW 21 ST HOLLYWOOD, FL 33023	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>6278 SW 21 ST</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>MIRAMAR</i>	
Zip	Country	Zip <i>33023</i>	Country <i>FLA</i>
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WILLIAMS, CARL R 6278 SW 21 ST HOLLYWOOD, FL 33023		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, CARL R 6050 DAWSON STREET HOLLYWOOD, FL 33023 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Carl Williams</i>		Date: <i>5-24-08</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

40100073



05192008 Chg-P CR2E034 (12/06)

4. FEI Number 65-0966099 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



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Document Number P99000110267
Business Entity Name CARL FINISHING, INC.

FEI Number 65 - 0966099

FEI Number Status Listed Above Applied For Not Applicable

Certificate of Status \$8.75 (Optional)

Election Campaign Financing Trust Fund Contribution Yes No

Principal Place of Business

Address 6278 SW 21 ST (PO Box not acceptable)

Suite, Apt. #, etc.

City, State MIRAMAR, FL

Zip Code & Country 33023

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise your mailing address.

Mailing address same as principal address

Address 6278 SW 21 ST

Suite, Apt. #, etc.

City, State HOLLYWOOD, FL

Zip Code & Country 33023

Name And Address of Registered Agent

Name (Last, First, Middle, Title) WILLIAMS, CARL, R

- OR -

Business to serve as RA

ATTACHMENT
40106644
#P99000110267

Street Address In Florida 6278 SW 21 ST (PO Box not acceptable)

Suite, Apt. #, etc.

City, State HOLLYWOOD, FL

Zip Code & Country 33023 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.
Registered Agent Signature
This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name And Address

Name And Address #1

Title D
Name (Last, First, Middle, Title) WILLIAMS, CARL, R

- OR -

Entity Name to serve as Officer/Director

Street Address 6050 DAWSON STREET
City, State HOLLYWOOD, FL
Zip Code & Country 33023

Name And Address #2

Title
Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address
City, State
Zip Code & Country

Name And Address #3

Title

ATTACHMENT

40106644

#P990000110267

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Earl Williams

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue

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