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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V19714

**(7)** 

CARWAL OF OBLANDO, INC.

Principal Place of Business Mailing Address										
8810 REPARTO ORLANDO FL 3		8810 REPARTO DR ORLANDO FL 32825-8324	8810 REPARTO DR ORLANDO FL 32825-8324							
						3. Date Incorporated or Qualified 03/06/1992	d 3e. Date of Last Report 01/23/1996			
2. Principal F	lace of Busness	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For		
21	H _ 1 -	26				<b>59-3114919</b>   Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del>                                      </del>			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State	City & State			6. Election Campaign Financing\$5.00 May Be				
23		28				Trust Fund Contribution Added to Fees				
Zip	Country	Ζφ 11	ê			8. This corporation has liability for intangible tax under s. 199.032,				
24	25   29   9. Name and Address of Current Registered Agent		30	30		Florida Statutes Yes No  10. Name and Address of New Registered Agent				
DEO		on nogotorou Agont		81	Name	10, mante and Appropriation in	B.010100	- gotti		
	etta, Walter L. ) reparto dr			82	Ohrana Anlad	set Address (P.O. Box Number is Not Acceptable)				
	ANDO FL 32825				Street Add	odress (P.O. Box Number is Not Acceptable)				
				63						
				84	City	• • • • • • • • • • • • • • • • • • • •	FL	<b>85</b> Zip	Code	
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta im familiar with land accept the obl	ite of Florida. Such change was	s authorized	yd b	the corporat	coration submits this statement for the tion's board of directors. I hereby acce	ourpose of pt the app	i changing i ointment as	its registered ; registered	
SIGNATURE	Signature, typical or printed name of registered	agent and the it applicable (N	O15 Registered	1 Age	nt signature requi	red when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12	
TITLE	DP DELETE		1.1 TI	1.1 TITLE				Change	Addition	
NAME	BERETTA, WALTER L.		1.2 N/	ME	ļ					
STREET ADDRESS	8810 REPARTO DR		1.3 SI	REET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP		T - ZIP					
TITLE	DVP DELETE		2.1 TO	2.1 TOTLE				☐ Change	Addition	
NAME	ILEANA A. BERETTA		2.2 NA	NAME						
STREET ADDRESS	8810 REPARTO DRIVE				ADDRESS					
C-TY-ST-ZIP	ORLANDO FL			2. 4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		Channe	Addition	
TITLE				31 TITLE 32 NAME				Change	☐ Addition	
NAME	CARMEN M. BERETTA								ļ	
STREET ADDRESS	8810 REPARITO DRIVE				ADDRESS					
CITY - ST - 7IP TITLE				3.4. C(TY-ST-ZIP 4.1 THILE			****	Change	Addition	
NAME		C Detter	4 2 N					La Gridinge		
STREET ADDRESS			1		ADDRESS					
CITY - ST - ZIP					T-ZIP					
TITLE		DELETÉ	5.1 TI		1-415			Change	Addition	
NAME			5.2 N			•				
STREET ADDRESS					ADDRESS				ļ	
CITY-ST-ZIP					T-ZIP					
TITLE		DELETE	61 TI					Change	Addition	
NAME		001.000	62 N/							
STREET ADORESS			1		ADDRESS					
OIT OF THE					7 710					

14. I do 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 suppreniental 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 circular of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

hone #

**FILED** 

Jan 15 1997 8:00am

Secretary of State

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