

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V34857 (5)
 1. Corporation Name
CARNECO, CORPORATION

FILED
 95 JUL 17 AM 11:56
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Principal Place of Business 2024 E. OAKLAND PARK BLVD. SUITE 210 FT. LAUDERDALE FL 33306	Mailing Address 2024 E. OAKLAND PARK BLVD. SUITE 210 FT. LAUDERDALE FL 33306
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3015 N. OCEAN BLVD. Suite, Apt. #, etc. 22 # C-117. City & State 23 FONT LAUDERDALE FL Zip 24 33308	2a. Mailing Address 26 3015 N. OCEAN BLVD. Suite, Apt. #, etc. 27 # C-117. City & State 28 FONT LAUDERDALE FL Zip 29 33308
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3. Date Incorporated or Qualified 05/08/1992	3a. Date of Last Report 08/10/1994
4. FEI Number 65-0424314	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. This corporation has liability for attorney's fees under s. 100.020, Florida Statutes ☐	\$5.00 May Be Added to Fees
7. This corporation has liability for attorney's fees under s. 100.020, Florida Statutes ☒	Yes ☒ No ☐

9. Name and Address of Current Registered Agent ZULIAGA, ALVARO 2024 E. OAKLAND PARK BLVD. SUITE 210 FT. LAUDERDALE FL 33306	10. Name and Address of New Registered Agent 81 Name PAUL SIERRA 82 Street Address (P.O. Box Number is Not Acceptable) 3015 N. OCEAN BLVD. # C-117. 83 84 City FONT LAUDERDALE FL 85 Zip Code 33308
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 607.0505, Florida Statutes.

SIGNATURE *Paul Sierra* **PAUL SIERRA** 7/6/95

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS	
TITLE PTS	1. TITLE PTS	TITLE PTS	1. TITLE PTS
NAME ZULIAGA, JOAN	2. NAME NELYDA AVELLANEDA	NAME NELYDA AVELLANEDA	2. NAME NELYDA AVELLANEDA
STREET ADDRESS 2024 E. OAKLAND PARK BLVD.	3. STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.	STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.	3. STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.
CITY, ST, ZIP FT. LAUDERDALE FL	4. CITY, ST, ZIP FONT LAUDERDALE FL 33308	CITY, ST, ZIP FONT LAUDERDALE FL 33308	4. CITY, ST, ZIP FONT LAUDERDALE FL 33308
TITLE D	5. TITLE D	TITLE D	5. TITLE D
NAME ZULIAGA, JOAN	6. NAME NELYDA AVELLANEDA	NAME NELYDA AVELLANEDA	6. NAME NELYDA AVELLANEDA
STREET ADDRESS 2024 E. OAKLAND PARK BLVD.	7. STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.	STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.	7. STREET ADDRESS 3015 N. OCEAN BLVD. # C-117.
CITY, ST, ZIP FT. LAUDERDALE FL	8. CITY, ST, ZIP FONT LAUDERDALE FL 33308	CITY, ST, ZIP FONT LAUDERDALE FL 33308	8. CITY, ST, ZIP FONT LAUDERDALE FL 33308
TITLE	9. TITLE	TITLE	9. TITLE
NAME	10. NAME	NAME	10. NAME
STREET ADDRESS	11. STREET ADDRESS	STREET ADDRESS	11. STREET ADDRESS
CITY, ST, ZIP	12. CITY, ST, ZIP	CITY, ST, ZIP	12. CITY, ST, ZIP
TITLE	13. TITLE	TITLE	13. TITLE
NAME	14. NAME	NAME	14. NAME
STREET ADDRESS	15. STREET ADDRESS	STREET ADDRESS	15. STREET ADDRESS
CITY, ST, ZIP	16. CITY, ST, ZIP	CITY, ST, ZIP	16. CITY, ST, ZIP
TITLE	17. TITLE	TITLE	17. TITLE
NAME	18. NAME	NAME	18. NAME
STREET ADDRESS	19. STREET ADDRESS	STREET ADDRESS	19. STREET ADDRESS
CITY, ST, ZIP	20. CITY, ST, ZIP	CITY, ST, ZIP	20. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 135.02(6)(b), 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 make the 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 addition.

SIGNATURE: *Nelyda Avelaneda* **NELYDA AVELLANEDA** 7/6/95 (305) 564-5357