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 # V47335

(7)

CARRON BUSINESS CO.

FILED Jan 29 1997 8:00am Secretary of State



Dalania (Di	of 12 minus	NACTOR A CLOS		<u> </u>		4	
401 OCEAN (MIAMI BEACH	=	Mailing Address 401 OCEAN DR #407 MIAMI BEACH FL 33139-6	9630				·
,					3. Date incorporated or Qualified 07/01/1992	3a. Date of Last I 02/26/1996	Report
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For
21		26	··		NOT APPLICABLE		lot Applicable
Suite, Ap	ot #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	4	Additional lequired
City & Sta	ate	City & State	····		Election Campaign Financing Trust Fund Contribution	\$5.00) May Be to Fees
Zip	Country	Ζφ	Count	ry	8. This corporation has liability for i		
24	25	29	30	•	· · · · · · · · · · · · · · · · · · ·	Yes No	3. 100.002
	g. Name and Address of Cu		13-7	~,	10. Name and Address of New Re	gistered Agent	
LE	IB, CAROL F.		8	1 Name			
401 OCEAN DR #407			8	2 Street Add	Address (P.O. Box Number is Not Acceptable)		
MU	AMI BEACH FL 33139		8	3	<u> </u>		
			8	4 City		FL 85 Zip	Code
SIGNATURE	Signature Typed or printed name of registers	Leich	TE: Registered A		uired when renstating)	16,1997	DO IN 10
12.	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	
NAME	LEIB, CAROL F.		1,2 NAM	- 1		Carp ordings	Land Production
STREET ADDRESS	464 60EM 60 #467			ET ADDRESS			
CiTY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY	1			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAM				
STREET ADDRESS	S		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY				
TITLE		☐ DELETE	3.1 TITLE	ſ		Change	
NAME			3.2 NAM				
STREET ADDRESS	S			ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Change	Addition
NAME		ניין טניניונ	4.F TIFLE			Unplige	L. AUGION
				1			
STREET ADDRESS CITY-ST-ZIP	~		4.5 SINC	ET ADORESS			
TITLE		DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAM	1			***
STREET ADDRESS	s		5.3 STRE	ET ADDRESS			
CITY-ST-2IP			5.4 CITY	· [•		
TITLE		DELETE	6.1 TITLE		· · · ·	Change	Addition
NAME			6.2 NAM	ŧ			
STREET ADDRESS	s		6.3 STRE	et address	€.		
CITY - ST - ZIP			6.4 City	- ST - ZIP	•		

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 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.