

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90029 050 ***150.00

DOCUMENT # 157940 1. Entity Name PAUL'S CARPET CO., INC.	
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Principal Place of Business 2412 N. MIAMI AVENUE MIAMI, FL 33127-4434	Mailing Address 2412 N. MIAMI AVENUE MIAMI, FL 33127-4434
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DO NOT WRITE IN THIS SPACE



01162005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-0601518	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERNANDEZ, HENRY 2412 N. MIAMI AVE. MIAMI, FL 33137
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JACOMINO, ALFREDO 2412 N. MIAMI AVE. MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, HENRY 2412 N. MIAMI AVE. MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Luis A Hernandez 2412 N. Miami Ave Miami, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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: Luis A Hernandez 1/15/05 305-5736237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #