

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007849

FILED
Apr 26, 2005
Secretary of State

Entity Name: SOUTH FLORIDA CARPETS, L.L.C.

Current Principal Place of Business:

1935 NW 18TH STREET
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1935 NW 18TH STREET
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M & W AGENTS, INC.
2101 CORPORATE BLVD., STE 107
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: NORTH, JOSEPH C COO
Address: 1832 DRESSAGE CT., APT. #832
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: MAY, JONATHAN CEO
Address: 5512 OLD OCEAN RIDGE
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MGRM () Delete
Name: SENOMA, INC.,
Address: 1935 NW 18TH STREET
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM () Delete
Name: MURPHY, CYNTHIA S CFO
Address: 9568 BARLETTA WINDS PT.
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM () Delete
Name: SEEGER, SHANNON E T
Address: 1034 NW 121 LANE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM () Delete
Name: SEEGER, KENNETH V P
Address: 1034 NW 121 LANE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NORTH, JOSEPH C COO
Address: 10329 MEDICIS PLACE
City-St-Zip: WELLINGTON, FL 33467

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CYNTHIA MURPHY

CFO

04/26/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date