


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

**FILED**  
**Feb 23 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # M79291 (4)**

1. Corporation Name  
**SOUTH FLORIDA CARPETS, INC.**



Principal Place of Business <b>1700 BANKS RD STE 2                  MARGATE FL 33063</b>	Mailing Address <b>1700 BANKS RD STE 2                  MARGATE FL 33063</b>
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Date Incorporated or Qualified <b>05/04/1988</b>	
21 1935 NW 18th St.	2a. Mailing Address 1935 NW 18th St.	4. FEI Number <b>65-0053483</b>	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23 Pompano Beach, FL	28 Pompano Beach, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24 Zip 33069	25 Country U.S.A.	29 Zip 33069	30 Country U.S.A.
g. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

**SEEGER, SHANNON E.**  
**1700 BANKS ROAD, STE 2**  
**MARGATE FL 33063**

81 Name **same**

82 Street Address (P.O. Box Number is Not Acceptable)  
**1935 NW 18th St.**

83

84 City **Pompano Beach** FL 85 Zip Code **33069**

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ROBERTS, RAYMOND A.	
STREET ADDRESS	900 SW CYPRESS WAY	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	SEEGER, GEORGE V.	
STREET ADDRESS	335 DUANE PALMER BLVD	
CITY-ST-ZIP	SEBRING FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	SEEGER, KENNETH V.	
STREET ADDRESS	2943 NW 68TH AVE	
CITY-ST-ZIP	MARGATE FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	SEEGER, SHANNON E.	
STREET ADDRESS	2943 NW 68 AVE	
CITY-ST-ZIP	MARGATE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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.

SIGNATURE *Shannon Seeger* 2/2/98 95A-979-6364

CP2E034 (10/97)