

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150789

FILED
Mar 03, 2005
Secretary of State

Entity Name: TRINIDAD'S CARPET INC.

Current Principal Place of Business:

8415 N. DIXON AVENUE
TAMPA, FL 33604 US

New Principal Place of Business:

Current Mailing Address:

8415 N. DIXON AVENUE
TAMPA, FL 33604 US

New Mailing Address:

FEI Number: 20-0481239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRINIDAD, FREDY
8415 N. DIXON AVENUE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

TRINIDAD, FREDDY F
8415 N. DIXON AVENUE
TAMPA, FL 33604 US

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: FREDDY F TRINIDAD

03/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: TRINIDAD, FREDY
Address: 8415 N. DIXON AVENUE
City-St-Zip: TAMPA, FL 33604 US

Title: VP () Delete
Name: ZEPEDA, JOSE A
Address: 8415 N. DIXON AVENUE
City-St-Zip: TAMPA, FL 33604 US

Title: S (X) Delete
Name: ZEPEDA, JOSE R
Address: 8415 N. DIXON AVENUE
City-St-Zip: TAMPA, FL 33604 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: TRINIDAD, FREDDY F
Address: 8415 N. DIXON AVENUE
City-St-Zip: TAMPA, FL 33604 US

Title: VP (X) Change () Addition
Name: ZEPEDA, JOSE M
Address: 8415 N. DIXON AVENUE
City-St-Zip: TAMPA, FL 33604 US

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDDY F TRINIDAD

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03/03/2005

Electronic Signature of Signing Officer or Director

Date