FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

CHY-ST-ZIP

DOCUMENT # P94000011096 (2)
1. Corporation Name

BEACHSIDE CARPET & TILE INC.

Principal Place of Business Mailing Address

118 THIRD AVE

268.75

4-24-96 (45) 777-3014

218 THIRD A MELBOURNE	ve. Beach fl. 32951	218 THIRD AVE. MELBOURNE BEACH	218 THIRD AVE. MELBOURNE BEACH FL 32951					
					3. Date Incorporated or Qualified 02/02/1994	3a. Date of Last Report 08/29/1995		
2. Principal Plac		2a. Mailing Address			4. FEI Number			Applied For
	9 EASTEIN BLUB				59-3223100			Not Applicable
Suite, Apt. #,	etc.	Suite Apt. #, etc	∂uite Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State 23 Indian Harring 13:22+17. 28					Election Campaign Financing Trust Fund Contribution		Added to Fees	
Zip 3ラ9	Country 3.7 25 BREUALD	Zip 29	Gountn 30	<i>(</i>		. □No		199.032,
	9. Name and Address of Current F	Registered Agent			10. Name and Address of New F	Registere	d Agent	
			81	Name				
LANE, PATSY 948 EAST EAU GALLIE BLVD.			82	Street Add	treet Address (P.O. Box Number is Not Acceptable)			
INDIAN	HARBOUR BEACH FL 32937		83					
			84	City			85 Zı	Code
SIGNATURE S	ignature, bloom of privide manie of registered agont and OFFICERS AND (DIRECTORS	13.		ed where reinstaling ADDITIONS/CHANGES TO OFF			
TITLE	D	DELETE	1 TITLE		Treatment of the state of the s		Change	Addition
NAME	LANE, PATSY		1.2 NAME					
STREET ADDRESS	218 THIRD AVE.		13 STREE	T ADDRESS				
DITY-ST-ZIP	MELBOURNE BEACH FL 329		1.4 C-TY-					
TITLE	D DODEST	DELETE	2 1 TITE				☐ Change	☐ Addition
NAME	DWYER, ROBERT 218 THIRD AVE.		2.2 NAME	!				
STREET ADDRESS	MELBOURNE BEACH FL 329	£1	1	SZBROCA 1				
CITY-ST-ZIP TITLE	MELBOONINE DEACTIFE 328	T DELFTE	24 CITY - 3 1 TiF. 6				Change	Addition
NAME		-	3.2 NAME					
STREET ADDRESS			33 STRE	ET ADDHESS				
CITY-ST-ZIP			340011	ST ZIF			_ <u></u>	<u>-</u>
TITLE		☐ DELETE	4 1 Title				Change	Add tion
NAME			4.2 NAME					
STREET ADDRESS				I ADDRESS				
CITY - ST - ZIP		☐ DELETE	4.4 CITY - 5.1 Ti 'LE				Change	Addition
TITLE			5 2 NAME	į.				
NAME STREET ADDRESS				I ADDRESS				
CITY-SI-ZIP			5.4 CITY					
TITLE		DELETE	6 1 lile(Change	☐ Addition
NAME			6.2 NAME					
STREET ADORESS			6.3 \$18 <i>0</i>	EL ADORESS				

64 CHY: ST. ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(b). 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 eath; that I am an officer or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name