

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

FILED
Apr 14 1998 8:00am
Secretary of State



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION ANNUAL REPORT **1998**

DOCUMENT # P97000013198 (1)
 1. Corporation Name
SUMMIT CARPET OF PENSACOLA, INC.



Principal Place of Business: P.O. BOX 8412, PENSACOLA FL 32505
 Mailing Address: P.O. BOX 8412, PENSACOLA FL 32505

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 1412 West Fairfield	26	27 Suite, Apt. #, etc.	
22 Suite 3	27	28 City & State	
23 Pensacola, FL	28	29 Zip	
24 32505	29	30 Country	
25 USA	30		

3. Date Incorporated or Qualified: **02/10/1997**

4. FEI Number: **58-2135400**

5. Certificate of Status Desired: Applied For, Not Applicable

6. Election Campaign Financing Trust Fund Contribution: \$8.75 Additional Fee Required

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes, No

9. Name and Address of Current Registered Agent

KING, A L
1897 BROYHILL LANE
PENSACOLA FL 32526

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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	P	DELETE
NAME	FIDLER, MARK	
STREET ADDRESS	4103 COUNTRY WAY	
CITY-ST-ZIP	COHUTTA GA 30710	
TITLE	P	DELETE
NAME	FIDLER, BARBARA	
STREET ADDRESS	4103 COUNTRY WAY	
CITY-ST-ZIP	COHUTTA GA 30710	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	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: _____

04/14/98. 800-429-9300

CR2E034 (10/97)