5225 U.S. 1 SC ST. AUGUSTIN				
Current Ma	iling Address:			
5225 U.S. 1 ST. AUGUS	SOUTH TINE, FL 32086 US			
FEI Number: 59-3028820		Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:			
JAMES, JOHN				
5225 US HWY	E, FL 32086 US			
5225 UŚ HWY ST AUGUSTIN		istered office or regis	tered agent, or both, in the State of Flo	prida.
5225 US HWY ST AUGUSTIN The above name	E, FL 32086 US	istered office or regis	tered agent, or both, in the State of Flo	orida. 04/25/2019
5225 US HWY ST AUGUSTIN The above name	E, FL 32086 US d entity submits this statement for the purpose of changing its regis	istered office or regis	tered agent, or both, in the State of Flo	
5225 US HWY ST AUGUSTIN The above name SIGNATUR	E, FL 32086 US d entity submits this statement for the purpose of changing its regis E: JOHN JAMES	istered office or regis	tered agent, or both, in the State of Flo	04/25/2019
5225 US HWY ST AUGUSTIN The above name SIGNATUR	E, FL 32086 US d entity submits this statement for the purpose of changing its regis E: JOHN JAMES Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of Fk	04/25/2019
5225 US HWY ST AUGUSTIN The above name SIGNATUR Officer/Dire	E, FL 32086 US d entity submits this statement for the purpose of changing its regis E: JOHN JAMES Electronic Signature of Registered Agent ector Detail :			04/25/2019
5225 US HWY ST AUGUSTIN The above name SIGNATUR Officer/Dire Title	E, FL 32086 US d entity submits this statement for the purpose of changing its regis E: JOHN JAMES Electronic Signature of Registered Agent ector Detail : D	Title	D	04/25/2019 Date

DOCUMENT# L94692

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: JAMES BROS. CARPET & TILE, INC.

Current Principal Place of Business:

I hereby 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 all other like empowered.

SIGNATURE: JOHN JAMES

D

Electronic Signature of Signing Officer/Director Detail

FILED Apr 25, 2019 Secretary of State 1475836809CC