

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000099808

**Entity Name:** THE CARPET BOUTIQUE III, INC.

**Current Principal Place of Business:**

2250 NE 163RD STREET  
# 3A  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

4103 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146 US

**FEI Number:** 46-4345121

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GONZALEZ, CLARA H  
4103 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GONZALEZ, CLARA H  
Address 4103 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33146

Title VP  
Name GONZALEZ, MANUEL P  
Address 4103 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33146

Title T  
Name HERNANDEZ, ADRIANA  
Address 4103 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33146

Title S  
Name CORONADO, CLARA  
Address 4103 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33146

*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:** ADRIANA HERNANDEZ

**TREASURER**

**04/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date