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FILED

Jan 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 188402 (2)  
1. Corporation Name  
THE CARPET MART REALTY CORPORATION

Principal Place of Business Mailing Address  
12645 SO DIXIE HWY 12645 S. DIXIE HIGHWAY  
MIAMI FL 33156 MIAMI FL 33156  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
10/14/1955  
4. FEI Number 59-6058971 Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees  
8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country  
25 Country 30 Country

9. Name and Address of Current Registered Agent  
PLOTKIN, ROBERT  
12645 S. DIXIE HIGHWAY  
MIAMI FL 33156  
10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *Robert Plotkin* DATE 1-10-98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	
NAME	PLOTKIN MARY	1.2 NAME	
STREET ADDRESS	8830 S.W. 92 PL.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	PLOTKIN, DONALD	2.2 NAME	
STREET ADDRESS	1970 HENDERSONVILLE HWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	SKYLAND NC	2.4 CITY-ST-ZIP	
TITLE	P	3.1 TITLE	
NAME	PLOTKIN, ROBERT	3.2 NAME	
STREET ADDRESS	8950 S.W. 93 CT.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 in an attachment with an address.

SIGNATURE: *Robert Plotkin* REQUIRED DATE 1-10-98 (305) 232-2480  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE # 62193004

CR2E034 (10/97)