

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 387114 (2)

1. Corporation Name  
DON BAILEY CARPETS, INC.



Principal Place of Business

14831 N.W. 7 AVE.  
MIAMI FL 33168

Mailing Address

CON BAILEY CARPETS  
8300 BISCAYNE BLVD  
MIAMI FL 33138  
US

3. Date Incorporated or Qualified  
08/19/1971

3a. Date of Last Report  
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number

59-1358297

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAILEY, ROBERT R.  
14831 N.W. 7 AVENUE  
MIAMI FL 33168

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 607.1508, 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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME BAILEY, DONALD  
STREET ADDRESS 14831 N.W. 7 AVE  
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE T  
NAME BAILEY, DONALD JR  
STREET ADDRESS 14831 NW 7 AVE  
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☐ Change ☒ Addition

1.2 NAME HINSON, ALBERT

1.3 STREET ADDRESS 2208 S. ST. RD. 7

1.4 CITY-ST-ZIP MIRAMAR, FL 33023

2.1 TITLE PD ☒ Change ☐ Addition

2.2 NAME BAILEY, DONALD JR

2.3 STREET ADDRESS 14831 N.W. 7 AVE

2.4 CITY-ST-ZIP MIAMI, FL 33168

3.1 TITLE VD ☐ Change ☒ Addition

3.2 NAME BAILEY, ROBERT

3.3 STREET ADDRESS 14831 N.W. 7 AVE

3.4 CITY-ST-ZIP MIAMI, FL 33168

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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; 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AL HINSON

1/18/96 (305) 757-1560

CR2E034 (12/95)