

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 413229

FILED
Apr 19, 2007
Secretary of State

Entity Name: HOUSE OF CARPETS, INC.

Current Principal Place of Business:

P O BOX 4395
FT WALTON BEACH, FL 325491395

New Principal Place of Business:

314 N EGLIN PKWY
FT WALTON BEACH, FL 325491395

Current Mailing Address:

P O BOX 4395
FT WALTON BEACH, FL 325491395

New Mailing Address:

FEI Number: 59-1427096 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TAMI DUTTWEILER
314 ELGIN PARKWAY
FT WALTON, FL US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: DUTTWEILER, TAMI A PDS
Address: P.O. BOX 502
City-St-Zip: FT WALTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: DUTTWEILER, TAMI A PDS
Address: 314 N EGLIN PKWY
City-St-Zip: FT WALTON BEACH, FL USA 32

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TAMI ALFORD DUTTWEILER

PDS

04/19/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date