FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION ANNUAL REPORT Sandra B. Mortham Secretary of State FILED DIVISION OF CORPORATIONS 1997 DOCUMENT # 4/9207 97 MAY 12 AM 11: 54 Carpet Corp. Of YAUATHA SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address ristol Florid 3a. Date of Last Report 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes ☐ Yes 29 Florida Statutes 30 urrent Registered Agent 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) quarter typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. (96/6) DELETE 1 1 TITLE THE NAM: 1.2 NAME -05/12/97--01058--006 13 STREET ADDRESS ****165.00 ****165.00 14 CITY-ST-ZIP City St Zip THILF 21 TITLE Change ■ Addition NAME 2.2 NAME SCHOOL AT DRESS. 2.3 STREET ADDRESS CITY ST 28 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition 1/11/ NAM: 3.2 NAME STREET ACIDRESS 3.3 STREET ADDRESS CHY SI ZIE 3 4. CITY - ST - ZIP TOTAL 41 TITLE ☐ Change Addition 4. 2 NAME 4.3 STREET ADDRESS SHEEL ASHRES OTY \$1.76 4.4 CITY - ST - ZIP 51 TITLE Change Addition 1163 NAM 5.2 NAME **53 STREET ADDRESS** 54 CITY-ST-ZIP Change Addition THE **BUTTER** NAM 62 NAME $(-1801\pm A)([+)^{11.5})$ 63 STREET ADDRESS 64 CITY-ST-ZIP does not qualify for the clemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the qual report is the rand accurate and that my signature shall have the same legal effect as if made under oath; that uster as per period to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby centry to information indicate on supplied with thi report or suppleme Lair an officer or di proporation or the rec appears in Block 12 nged, or on an SIGNATURE: