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

PROFIT-CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

1999 DOCUMENT # 624662

FACTORY BROADLOOM, INC.									
Principal Place of Business	1 ( A B ( ) B ( )   B ( ) B (								
4153 NORTH DIXIE HIGHWAY POMPANO BEACH FL 33064	4153 NORTH DIXIE I POMPANO BEACH F				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed 07/10/1979				
Principal Place of Business     The Principal Place of Business	2a. Mailing Address	S		4. FEI Number 59-1926886					
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired				
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution					
Zip Country	Zip	Cou 30	ntry	8. This corporation owes the current year Intangible Personal Property Tax.					
Name and Address of Current Registered Agent			- 1		10. Name and Address of New Registered Agent				
ZAPAREGOS, GAVRIL 2027 N DIXIE HWY POMPANO BEACH FL 33060			81 82 83	Name Street Add	ress (P.O. Box Number is Not Acceptable)				
			84	City	FL  85				
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent. I am familiar with, and accept the o	itate of Florida. Such change	was authorized	ı by	the corporati	poration submits this statement for the purpose of changion's board of directors. I hereby accept the appointment				
SIGNATURE Signature, typed or printed name of registers	d agant and title if annicable	(NOTE: Registered	Agen	t signature require	nd when reinstating) DATE				

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90028 011 \*\*\*150.00



Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

□No

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		84	City				F	85	Zip Co	de
egistered agent, or both, in the State of F	lorida. Such change was aut	horized by	the corp	corporation oration's bo	n submits this pard of direct	s statement fo ors. I hereby	or the purpose of accept the app	of changin pintment a	g its re as regis	gistered tered
Signature, typed or printed name of registered agent and	title if applicable. (NOTE: R	legistered Agen	it signature i	equired when r	einstating)		DATE			
OFFICERS AND D	DIRECTORS	13.		/	ADDITIONS/	CHANGES T	O OFFICERS A			
P	☐ DELETE	1,1 TITLE						☐ Cha	nge	☐ Addition
ZAPAREGOS, GAVRIL		1.2 NAME								
2027 N DIXIE HWY		1.3 STREET	r address							
POMPANO BEACH FL		1.4 CITY-S	T-ZIP					<u></u>		
	☐ DELETE	2.1 TITLE						☐ Cha	nge	Addition
And the second s		2.2 NAME	-							· · ·
		2.3 STREET	T ADDRESS							
		2. 4 CITY-S	T-ZIP							
	☐ DELETE	3.1 TITLE						☐ Cha	inge	Addition
		3.2 NAME								
·		3.3 STREET	FADDRESS							1
		3.4. CITY-S	T-ZIP							
	☐ DELETE	4.1 TITLE		1				☐ Cha	nge	Addition A
		4. 2 NAME						-		
		4.3 STREET	TADDRESS							
·		4.4 CITY-S	T-ZIP							
-	☐ DELETE	5.1 TITLE				÷		☐ Cha	inge	Addition
•	•	5.2 NAME								
		5.3 STREET	T ADDRESS							
		5.4 CITY-S	T-ZIP	<u></u>						
	☐ DELETE	6.1 TITLE						Cha	inge	Addition
		6.2 NAME		]						
		6.3 STREET	TADDRESS							
, ·		**** = *** =		l						
certify that the information supplied with t	his filing does not qualify for t	he exempt	ion state	in Section	119.07(3)(i	, Florida Stat	utes. I further c	ertify that	the info	ermation
	egistered agent, or both, in the State of Fin familiar with, and accept the obligation  Signature, typed or printed name of registered agent and  OFFICERS AND E  P ZAPAREGOS, GAVRIL 2027 N DIXIE HWY POMPANO BEACH FL	agistered agent, or both, in the State of Florida. Such change was aut of familiar with, and accept the obligations of, Section 607.0505, Florid Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  P ZAPAREGOS, GAVRIL. 2027 N DIXIE HWY POMPANO BEACH FL  DELETE  DELETE  DELETE	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above spistered agent, or both, in the State of Florida. Such change was authorized by m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen OFFICERS AND DIRECTORS 13.  P	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named egistered agent, or both, in the State of Florida. Such change was authorized by the corporate familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature, typed or printed name of registered agent and title if applicable.	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation agistered agent, or both, in the State of Florida. Such change was authorized by the corporation's both familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reaching the provided in the corporation's both provided by the corporation's both provide	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this sgistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of direct in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for significant or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Committee	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of september agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the apprint familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signatura, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing significant of foods. Such change was authorized by the corporation's board of directors. I hereby accept the appointment of familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    OFFICERS AND DIRECTORS	to the provisions of Sections 607 0502 and 607 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the Fiorida. Statutes.    Signature, typed or printed name of migristered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

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 on a particular with an address, with all officer like empowered.

SIGNATURE: