

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 683107 (7)

1. Corporation Name

CARPET SOURCE, INC



Principal Place of Business

1855 GRIFFIN ROAD
B404
DANIA FL 33004
US

Mailing Address

20803 BISCAYNE BOULEVARD
200
AVENTURA FL 33180
US

3. Date Incorporated or Qualified
08/26/1980

3a. Date of Last Report
03/07/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number
59-2021055

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

SCHNEIDER ALAN B ESQ
20803 BISCAYNE BOULEVARD
200
AVENTURA FL 33180

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 607.1505, 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 of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

11 TITLE ☐ DELETE

NAME
JORGE, JUAN C.
STREET ADDRESS
1855 GIFFIN RD, B404
CITY-STATE-ZIP
DANIA FL

11 TITLE ☐ DELETE

NAME
VST
STREET ADDRESS
TARANTINO, LOUIS
1855 GRIFFIN ROAD
CITY-STATE-ZIP
DANIA FL

11 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

11 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

11 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

11 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

21 NAME

22 STREET ADDRESS

23 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

31 NAME

32 STREET ADDRESS

33 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

41 NAME

42 STREET ADDRESS

43 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

51 NAME

52 STREET ADDRESS

53 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

61 NAME

62 STREET ADDRESS

63 CITY-STATE-ZIP

11 TITLE ☐ Change ☐ Addition

71 NAME

72 STREET ADDRESS

73 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this form 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 applicable 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-96 (84) 92S-1307

CR2E034 (12/95)