

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Page 10/12

CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 OCT -9 AM 5:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 683107

1. Corporation Name

CARPET SOURCE, INC.

2. Principal Office Address

1855 GRIFFIN ROAD

3. Mailing Office Address

6401 SW 87 AVE.

Suite, Apt. #, etc.

B-404

Suite, Apt. #, etc.

204

City & State

DANIA, FL

City & State

MIAMI, FL

Zip

33004

Country

BROWARD

Zip

33173

Country

DADE

4. Date Incorporated or Qualified
To Do Business in Florida

8/26/00

5. FEI Number

59-2021055

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JUAN C. JORGE

Street Address (P.O. Box Number is Not Acceptable)

1855 GRIFFIN ROAD

Suite, Apt. #, Etc.

B-404

City

DANIA

State

FL

Zip Code

33004

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 9-27-01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	JUAN C. JORGE	1855 GRIFFIN ROAD B404	DANIA, FL 33004

99-0140R T8

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2081 (9/00)

Page 2012

JACOBS & CARNEY
CERTIFIED PUBLIC ACCOUNTANTS

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STUART L. JACOBS, PFS, C.P.A. (FLA)
REGISTERED INVESTMENT ADVISOR

JERRY L. CARNEY, C.P.A. (FLA)

MYRON R. KAHN, C.P.A. (FLA)

DAVID L. JACOBS, C.P.A. (FLA)

MEMBERS

AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

September 20, 2001

Department of State
Division of Corporations
PO Box 6327
Tallahassee, Fl 32314

RE: Carpet Source, Inc.

To Whom it May Concern,

We are the accountants for the above referenced corporation. During a routine internet search, it was brought to our attention that Carpet Source, Inc. was dissolved during 1999. On the enclosed copy of their 1998 Corporate Annual Report, we had indicated that the mailing address for the corporation should be the same as the corporation's place of business. The change was never made and all mailings from your office were sent to an Aventura, Florida address and never received by the corporation. If the mailings had been sent to the proper address as requested, the corporation would have complied with all annual report filings and would not have been dissolved. As you will notice on the reinstatement form, we have included our address as the mailing address so no more delinquencies or dissolutions will occur.

Enclosed please find a check in the amount of \$450, \$150 for 1999, 2000, and 2001. We respectfully request the \$600 reinstatement fee be waived since the requested address change was never made. Thank you for your attention to this matter and we look forward to your favorable reply.

Very truly yours,



David L. Jacobs, CPA