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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

ACE CARPET SUPPLIES, INC.

FILED Mar 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						r confilhe åres annet dater dette fåldt didt annet mint	1 M 1 M 1 M 1	7011 1010	H 81811 1881		
5311 S. DIXIE HWY. W PALM BEACH FL 33405 2. Principal Place of Business 21		5311 S. DIXIE HWY. W PALM BEACH FL 33405				DO MOT WOITE IN THIS	CDAOL	-			
						DO NOT WRITE IN THIS: 3. Date Incorporated or Qualified 10/03/1980	SPACE				
	Place of Business	2a. Mailing Address 26				4, FEI Number 59-2025849	- -		oplied For		
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Stat	20	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 24	Country 25	Z ₁ p	30	intry	,	8. This corporation owes or has paid the cur		ar Int			
	9. Name and Address of Curre	nt Registered Agent	-			10. Name and Address of New Registered	Agent				
HA	ATFIELD, JERRY			81	Name						
10	09 ELM RD PALM BCH FL 33409		82 Street			dress (P.O. Box Number is Not Acceptable)					
**	Trail Coll Le Collo			63							
ı				84	'	poration submits this statement for the purpose o ation's board of directors. I hereby accept the app	85		Code		
12.	Signature, typed or product carrie of registered at OF FICE HS AF	ND DIRECTORS	13.		eni signature requ	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND					
THLE		☐ DELETE	1.171				☐ Ch	ange	Addition		
NAME	HATFIELD, JAMES 252 POE DRIVE		1.2 N								
STREET ADDRESS	PALM SPRINGS, FL 33461				ADDRESS						
CITY-ST-ZIP	VD	DELETE	1.4 CI 2.1 TI		IT-ZIP	0/0/7/0	[☐ Ch	anne	Addition		
NAME	HATFIELD, JERRY		22 N			PIDITES		ango			
STREET ADDRESS	1009 ELM RD.				ADDRESS	1006 ELM 100					
CITY-ST-ZIP	W. PALM BEACH FL				SI-ZiP	WEST PARM Beach Ha	334	09	,		
TITLE	P	☐ DELFTE	3.1 TI			VEST PARM BEACH Ha	LP Ch	ange	Addition		
NAME	HATFIELD, JAMES		3.2 N/	AME		HATFIELD, JAMES 252 POE DR. PALM Springs Ha.					
STREET ADDRESS	252 POE DRIVE		3 3 S1	REET	ADDRESS	252 POE DR. 11	**				
CITY-ST-ZIP	PALM SPRINGS FL	T KILPTE			ST-ZIP	Parm Spaines Mai	<i>ਦ</i> ਹੈ ਤੋਂ	, ~ 🖛	· / -		
TITLE	}	DELETE	4.1 T		}		☐ Ch	ange	Addition		
NAME STREET ADORESS			4.2 N		ADDRESS				-		
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TITLE		DELETE	5.1 TI		11-411		Ch	ange	Addition		
NAME		- · · ·	5.2 N		1			-			
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP					5T - ZIP						
TITLE		DELETE	6.1 1)				Ch	ange	Additio		
NAME			6.2 N	AME							
CENTLE ADDRESS	I		60.0	MEET	ADDRESS						

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 lustee empower to oxecute 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 attact went with an address. 561 5825100