## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 10, 2008 08:00 A DOCUMENT # F05856 **Secretary of State** 1. Entity Name CARPET WORLD OF MIAMI, INC. Principal Place of Business Mailing Address 12221 SW 131 AVE 12221 SW 131 AVE MIAMI, FL 33186 US MIAMI, FL 33186 US 01042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2041524 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRIEDMAN, GARY DO NOT WRITE 11445 SW 110 LANE MIAMI, FL 33176 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9, Election Campaign Financing \$5.00 \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS PD TITLE NAME FRIEDMAN, GARY U000000852247 11445 SW 110 LANE STREET ADDRESS 03/26/08-80021-003.150.00 CITY-ST-ZIP MIAMI, FL 00000, 33176 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report by supplemental report is tope 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 10 or Block 11 if changed, or on an attach help with an address, with an other like empowered.

SIGNATURE:

CITY-ST-7IP

NATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

3708

(305) 255-8880

**FILED** 

Daytime Phone #