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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # F

F10093

CARPET WORKSHOP, INCORPORATED

(5)

FILED Feb 16 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Ad	Mailing Address						
3350 BURRIS	RD		3350 BURRIS RD						
FT LAUDERDA	ALE FL 33314	FT LAUDE	FT LAUDERDALE FL 33314				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							10/31/1980		
2. Principal Pi	lace of Business		2a. Mailing Address				4. FEI Number	} +	pplied For
21			26				59-2038003		ot Applicable
Suite, Apt.	#, etc.	h	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27						Fee R	tequired
City & State	Э	City &	City & State				6. Election Campaign Financing		May Be
23		28					Trust Fund Contribution	Added	to Fees
Zip	Country	Ζιρ		Countr			8. This corporation owes or has paid the		
24	25	29		[30]			Personal Property Tax due June 30.		No
	9. Name and Address of Curr	rent Registered A	gent				10. Name and Address of New Regist	ered Agent	
WA	ire, L. Daniel			8	1 N	ame			
3350 BURRIS ROAD					82 Street Address (P.O. Box Number is Not Acceptable)				
FT	LAUDERDALE FL 33314		•			discontinuos (1.10, 20), Hambor to Hot Hoodplasto)			
			Ī						
				L	1	:4 .		1221 -	
				8	4 Ci	ity		FL 85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.0	502 and 607 1508	Florida Statute	s, the abo	ve-na	med corp	oration submits this statement for the purp		its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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.									
agent, i am lamiliar with, and accept the colligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12. OFFICERS AND DIRECTORS 13.						,	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE				1.5 TITLE		Ĭ		Change	Addition
NAME	WARE, L. DANIEL			1.2 NAMI	F				
STREET ADDRESS	ACCO DIDIZANE			1.3 STRE		BLCC			
CITY-ST-ZIP	ET LAUDEDDALE EL			1.4 CITY-		1			
TITLE	\$		DELETE	2.1 TITLE				Change	Addition
NAME	WARE, FRANCINE				2.2 NAME				
	2932 BIRKDALE					Droc			
STREET ADDRESS	FT. LAUDERDALE FL			2.3 STRE					}
CITY-ST-ZIP	FI. LAUDENDALE FL		DOLOTE	2 4 CITY		P		Channa	Addition
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NAME				3 2 NAM					
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CITY-ST-ZIP				3 4. CITY		P			
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NAME				4. 2 NAM	NE .				
STREET ADDRESS				4.3 STRE	et adde	ress			
CITY-ST-ZIP				4.4 CITY	- ST- ZIP	>			
TITLE			☐ DELETE	5.1 10 LE			!	☐ Change	☐ Addition
NAME				5.2 NAME	E				1
STREET ADDRESS				5.3 STRE	ET ADOF	RESS			
CITY-ST-ZIP				5.4 CITY					1
TITLE			DELETE	6.1 TITLE		1		☐ Change	☐ Addition
NAME				6.2 NAME				-	ŀ
STREET ADDRESS						BE 22			
I				6.3 STREET ADDRESS 6.4 C(TY-S1-Z)P					
CITY-ST-ZIP				6.4 City	- \$1 - ZIP	<u> </u>			'

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 at 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.

CICALATURE: Y

V 2-9-98