2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

FILED Mar 02, 2007 08:00 AM DOCUMENT # F23979 **Secretary of State** 1. Entity Name KENDALL CARPETS, INC. Principal Place of Business Mailing Address 10668 SW 186 ST MIAMI FL 33157-6720 10668 SW 186 ST MIAMI FL 33157-6720 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2096386 Not Applicable Zip Country Zıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ, AURELIO Street Address (P.O. Box Number is Not Acceptable) 10668 SW 186 STREET MIAMI FL 33157-6720 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THE MLE ☐ Delete ☐ Change ☐ Addition FERNANDEZ, AURELIO NAME 10668 SW 186 STREET STREET ADDRESS STREET ADDRESS U00000653236 MIAMI FL 33157-6720 CITY-ST-7IP CITY-ST-ZIP DDE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE Delete TITLE Change Addition NAME. NAME STREET ADDRESS STREET ADDRESS CHY-ST 299 OITY ST ZID-TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition | NAME STREET ADDRESS STREET ADDRESS CHY+ST-7/P CITY-S1-7IP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 attachment with an address, with all other like empowered.

AURELIO Fernandez