SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000004203 (6)

RUG DOCTOR, INC.

Principal Place of Business	Mailing Address				
5773 RODMAN STREET HOLLYWOOD FL 33023	5773 RODMAN STREET HOLLYWOOD FL 33023				
•					

FILED Jul 23 1998 8:00am Secretary of State



							I I III BIBIT IIII I BIBT III I I III		
Principal Place	e of Bus iness	Mailing Address							
5773 RODMAN STREET 5773 RODMAN STREET									
HOLLYWOOD FL 33023 HOLLYWOOD FL 33023					DO NO	DO NOT WRITE IN THIS SPACE			
	•				3. Date incorporated or Qu				
					09/15/1993				
2. Principal P	lace of Business	2a. Mailing Address		A	4. FEI Number		Applied For		
2788	N. Larkin Ave	26 2/88 N.	Larki	n Ave	16-1323190		Not Applicable		
Suite, Apt.	#, eto.	Suite, Apt. #, etc.			5. Certificate of Status Des	ired 🗀	\$8.75 Additional		
22		27					Fee Required		
City & Stat		City & State			6. Election Campaign Fina	ncing 🗀	\$5.00 May Be		
23 Fres	COUNTRY		CA Coun	do.	Trust Fund Contribution		Added to Fees		
24 9372		^{Zip} 93727	30	iu y	This corporation owes o Personal Property Tax of		Yes No		
[24]	9. Name and Address of Current	. d t	1301		10. Name and Address of				
CT	CORPORATION SYSTEM			81 Name					
	1200 SOUTH PINE ISLAND ROAD				Address (C.O. Boy Number is Not A	scentable)	***		
PLANTATION FL 33324			[82 Street	Street Address (P.O. Box Number is Not Acceptable)				
'-"			1	83					
			ļ.	84 City			RE Zin Code		
			[84 City		FL	85 Zip Code		
11. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statute	s, the abo	ve-named	corporation submits this statement for	the purpose of ch	nanging Its registered		
office or agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligat	t Florida. Such change was a ions of, section 607.0505, Flo	authorized orida Statu	by the corp tes.	poration's board of directors. I hereby	accept the appoi	ntment as registered		
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE									
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	O OFFICERS AN			
TITLE	PCD Kent, Jerry R	L DELETE	1.1 TITL				Change Addition		
NAME	1724 CLIFFVIEW DRIVE		1.2 NAN				}		
STREET ADDRESS	PLANO TX 75093			EET ADDRESS			[]		
CITY-ST-ZIP	VCD	DELETE	2.1 TITL	/-ST-ZIP			Change Addition		
NAME	KENT, JEANETTE H	[_] DETELE	2.2 NAM				Change Addition		
STREET ADDRESS	1724 CUFFVIEW DRIVE			EET ADDRESS					
CITY-ST-ZIP	PLANO TX 75093			/-ST-ZIP					
TITLE	V	DELETE	3.1 TITL	 	P		X Change Addition		
NAME	WALL, TIM		3.2 NAM	1E	WALL, TIM		CAL CITATION		
STREET ADDRESS	1544 E. SALEM			EET ADDRESS	2788 N. LARKIN	AVE	-		
CITY-ST-ZIP	FRESNO CA 93710			/-ST-ZŧP	FRESNO, CA 9372	7			
TITLE	ST	DELETE	4.1 TITL				X Change Addition		
NAME	DAVIDIAN, TIM		4.2 NAM	IE	DAVIDIAN, TIM				
STREET ADDRESS	1601 E. JORDAN		4.3 STR	EET ADDRESS	2788 N. LARKIN				
CITY-ST-ZIP	FRESNO CA 93710		4.4 CITY	r-ST-ZIP	FRESNO, CA 9372	7			
TITLE	V	DELETE	5.1 TITL	E	v		X Change Addition		
NAME	WALL, KAREN	_	5.2 NAM	IE	WALL, KAREN				
STREET ADDRESS	1544 E. SALEM		5.3 STR	EET ADDRESS	2788 N. LARKIN	AVE			
CITY-ST-ZIP	FRESNO CA 93710		5.4 CITY	/-ST-ZiP	FRESNO, CA 9372				
TITLE		DELETE	6.1 TITL	E			Change Addition		
NAME			6.2 NAM	IE					
STREET ADDRESS			6.3 STR	EET ADDRESS					
CITY-ST-ZIP			6.4 CITY	/-ST-ZIP	<u></u>				

14. I hereby 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and in Block 12 or Block 13 if changed, or on an attachment with an address.

TIM DAVIDIAN, SECRETARY/TREAS. 7/10/98