2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jan 10, 2005 8:00 am Secretary of State **DOCUMENT # F94000003270** 01-10-2005 90027 015 ***158.75 1. Entity Name CARPET SERVICE INTERNATIONAL, INC. Mailing Address Principal Place of Business 109 W HILLSBORO BLVD 109 W HILLSBORO BLVD 40000286 US DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 CR2E034 (10/03) Applied For City & State City & State 4. FEI Number Not Applicable 36-3900547 Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MOLFESE, VICTOR Street Address (P.O. Box Number is Not Acceptable) 109 W HILLSBORO BLVD DEERFIELD BEACH, FL 33441 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. published on registered agents of the codynamics of the codynamics SIGNATURE remonths to supply the injury Comment of the Artification of the Army Hame depends in the book two or discoil the 25 The Iby Calibrature, typed or printed name of registered agent and title if applicable. At the MOTE Registered Agent signature required when reinstating) Will Library Examples. Heat DATE as a most fine an example and title if applicable. 9. Election Campaign Financing (JEELY) FILE NOWIII FEE IS \$150.00 \$5.00 May Be After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11' 10. 11. TITLES Delete TITLE-Change ☐ Addition NAME MOLFESE, VICTOR NAME 22355 BOYACA STREET ADDRESS 6477 VIA BENITA STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP BOCA RATON, FL ☐ Change Addition TITLE ☐ Delete TITLE MOLFESE, CARMINE NAME NAME STREET ADDRESS STREET ADDRESS 21 W 146 SHELLEY DR CITY-ST-ZIP ITASCA, IL 60143 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITÝ-ST-ZIP CITY-ST-7IP Change : Addition -- Delete --TITLE NAME > NAME stroid Lini yourguages. Hearth Other STREET ADDRESS! STREET ADDRESS 3.23 Asy 30 amacji una CITY-ST-ZIP 12. 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 are indicated on this report or suppliemental 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 appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all peter his epopowered. changed, or on an attachme

CER OR DIRECTOR

FILED