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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000004858 (6)

BAY AREA CARPETS, INC.

Principal Place of Business Mading Address

FILED May 05 1998 8:00am Secretary of State



6905 ADAMO TAMPA FL 33		6905 ADAMO DR TAMPA FL 33619		DO NOT WRITE IN TH 3. Date Incorporated or Qualified 09/20/1994	IIS SPACE
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 8320	E. Adamo Dr.	26 8320 E. A.	land Dr.	59-3269982	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	ya Fl.	City & State 28 Tampa F	7,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 73 6	1-0174	Zip 29 336/9 3	Country 10 ffills baru	8. This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
	g. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registers	ed Agent
	CORPORATION SYSTEM		81 Name		
1311 EXECUTIVE CENTER DR			82 Street	Address (P.O. Box Number is Not Acceptable)	
	ITE 200		83		
IAI	LLAHASSEE FL 32301				
			84 City	F	85 Zip Code
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.					
SIGNATURE					
	Signature, typical or pointed name of registered agent	· · · · · · · · · · · · · · · · · · ·	Registered Agert signature		
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
NAME	CP Nassar, a.j.		1.1 TITLE		∠ Change
STREET ADDRESS	1035 INDUSTRIAL DR NE		1.2 NAME 1.3 STREET ADDRESS	210 TownPark Dr.	
CITY-ST-ZIP	MARIETTA GA 30066		1.4 CITY-ST-ZIP	Kennesaw Ga. 30144	
TITLE	PD	DELETE	2.1 TITLE	THE SALE OF THE	Change Addition
NAME	ASHBY, RUFUS N		2.2 NAME		
STREET ADDRESS	6905 ADAMO DR		2.3 STREET ADDRESS	8320 E. Adams Dr.	
CITY-ST-ZIP	TAMPA FL 33619		2. 4 CITY - ST - ZIP	Tampa, Fl. 33619	
TITLE	\$D	☐ DELETE	3.1 TITLE		Change Addition
NAME	HARPER, GENE		3.2 NAME		
STREET ADDRESS	6905 ADAMO DR		3.3 STREET ADDRESS	210 Town Park Dr.	
CITY-ST-ZIP	TAMPA FL 33619		3 4. CITY - ST - ZIP	Kennesaw, Ba. 30144	
TITLE	TD	☐ DELETE	4 1 THILE		Change Addition
NAME	LEAHY, THOMAS P		4. 2 NAME	A.10 0	
STREET ADDRESS	1035 INDUSTRIAL DR NE		4.3 STREET ADDRESS	210 Town Park Dr. Kennessey, Ga. 30144	-
CITY-ST-ZIP	MARIETTA GA 30066	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Kennesaw, Ga. 30144	Change Addition
NAME		- Detert	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.