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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

- I KRONIN BON BONI IBON BOKO NIGU KOTO KIRA GADA DIDA BIRA BARA BIRA BIRA BIRA BIRA BIRA

1996

1. Corporation Name

SIGNATURE:

DOCUMENT # G0702

(7)

CARPETS & BLINDS BEAUTIFUL, INC.

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rincipal Place o	of Business	Mailing	Address					,, 000,,00			,
5122 EDGEW	ATER DR		2 EDGEWATER DR			!					
STE 200 ORLANDO FL	32810-5229	• • • •	: 200 Lando fl 32810-52	29			3. Date Incorporated or Q	ualified	2n Dat	e of Last R	enort
US		U\$					11/02/1982	damed		04/27/1	
. Principal Plac	ce of Business	2a. Mai	ling Address				4. FEI Number		I		Applied For
}		26					<u>59-2236441</u>				Not Applicable
Suite, Apt. #,	, etc.	Suit	te, Apt. #, etc.				5. Certificate of Status De-	sired		<b>-</b>	5 Additional Required
City & State			/ & State				6. Election Campaign Fina	ıncing		\$5.0	<b>0</b> May Be
Only or order		28					Trust Fund Contribution				d to Fees
Zip	Country	Zıp		Count	try		This corporation has lia     Florida Statutes	bility for in		ax under s	199.032,
	25 g. Name and Address of C	Current Registere	d Agent	30			10. Name and Address of			Agent	
	g, Name and Address of C	Carrent negistore	a Agoin	ε	1 Nam	e	10.				
MOODA	THE TANKE V				32 Stre	a Ardeleso	s (P.O. Box Number is Not A	Acceptab	e)		
	th, Janice V. Dgewater Dr			[	Stre	et Addres	g (2. O. DOX HOMOOF SO HOLL)	10000			
STE 200				E	33						
	DO FL 32810			1	34 City				FI	85 Z	ip Code
	the provisions of Sections 60	7 0500 and 607 15	OR Florida Statutes	the about	e-named	corporat	on submits this statement to	or the pur	nose of c	hanging its	registered offi
or registere	ad agont, or both, in the State (	NI FIORICIA. SUCH CHA	anue was authonze	d by the co	poration	's board	of directors. I hereby accept	the appo	ointment a	is registere	d agent. I am
familiar with	n, and accept the obligations o	of, Section 607.050	5, Florida Statutes.								
ignature 🕌	Slocature, typed or printed name of register	red agent and title if applic	abie. (NOT	Registered A	gent signatu	re required v	hen reinstating!		DATE		
	Signature, typed or printed name of register OFFICEI	reo agent and title if applic RS AND DIRECTOR		Registered A	gent signati	re required w	nen reinstatingt ADDITIONS/CHANGES	TO OFF			
2.						re required w		TO OFF		ID DIRECTO	
2. TLF	PD MCGRATH, JANICE V	RS AND DIRECTOR	RS	13.	LE	re required w		TO OFF			
2. TLF	OFFICEI <b>PD</b>	RS AND DIRECTOR	RS	13. 1, 1 TH 1,2 NAM	LE			TO OFF			
2. TLE AME TREET ADORESS	PD MCGRATH, JANICE V	RS AND DIRECTOR	RS DELETE	13. 1, 1 TH 1.2 NAM 1.3 STF 1 4 CH	le Me Eet addre Y-ST-ZIP			TO OFF		☐ Change	☐ Addition
2. THE AME TREET ADDRESS TTY-ST-ZIP	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V	RS AND DIRECTOR	RS	13. 1. 1 TH 1.2 NAS 1.3 STF 14 CH 2. 1 TH	LE ME IEET ADDRE Y-ST-ZIP			S TO OFF			☐ Addition
Z. TLE AME TREET ADDRESS ITY-ST-ZIP TLE	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V MYATT, NOEL P	RS AND DIRECTOR	RS DELETE	13. 1. 1 TH 1.2 NAN 1.3 STR 1.4 CIT 2. 1 TH 2.2 NAN	LE ME LEET ADDRE: Y-ST-ZIP LE ME	68		TO OFF		☐ Change	☐ Addition
2.  ILE  AME  IKEE1 ADDRESS  ITY-S1-ZIP  ILE  AME	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V MYATT, NOEL P 5122 EDGEWATER DF	RS AND DIRECTOR	RS DELETE	13. 1. 1 TIT 1.2 NAM 1.3 STR 1.4 CIT 2. 1 TIT 2.2 NAM 2.3 STR	LE ME JEET ADDRES Y-ST-ZIP LE ME REET ADDRE	68		TO OFF		☐ Change	☐ Addition
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SELECTION OF THE PROPERTY OF T	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V MYATT, NOEL P 5122 EDGEWATER DF	RS AND DIRECTOR	RS DELETE	13. 1.1 III 12 NAM 1.3 STR 1.4 CIT 2.1 TII 2.2 NAI 2.3 STR 2.4 CIT 3.1 TII 3.2 NAI 3.3 ST	LE ME JEET ADDRE Y-ST-ZIP LE ME REET ADDRE REET ADDRE	555		S TO OFF		☐ Change	Addition
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E STREET ADDRESS  THE AME  THEET ADDRESS  ITY-SI-ZIP  THE AME  THEET ADDRESS	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V MYATT, NOEL P 5122 EDGEWATER DF	RS AND DIRECTOR	RS DELETE DELETE	13. 1.1 III 1.2 NAA 1.3 STF 1.4 CIT 2.1 TII 2.2 NAI 2.3 STF 2.4 CIT 3.1 TII 3.2 NAI 3.3 ST 3.4 CII 4.1 TT 4.2 NA 4.3 ST 5.1 TII 5.2 NA 5.3 ST 5.4 CII 6.1 TI	LE ME ME LET ADDRE Y-ST-ZIP LE ME REET ADDRE Y-ST-ZIP LE ME REET ADDRE Y-ST-ZIP LE ME REET ADDRE IY-ST-ZIP ILE	555 555 555		S TO OFF		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
Z.  THE AME  THEFE I ADDRESS  ITY-SI-ZIP  THEFE I ADDRESS  THEFE I ADDRESS	PD MCGRATH, JANICE V. 5122 EDGEWATER DF ORLANDO FL V MYATT, NOEL P 5122 EDGEWATER DF	RS AND DIRECTOR	RS DELETE DELETE DELETE	13. 1.1 III 12 NAA 1.3 STF 1.4 CIT 2.1 TII 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIII 3.2 NAI 3.3 ST 3.4 CIT 4.1 TC 4.2 NA 4.3 ST 4.4 CIT 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI 6.2 NA	LE ME ME ME LEET ADDRE Y-ST-ZIP LE ME ME ME ME ME REET ADDRE Y-ST-ZIP LE ME ME REET ADDRE IY-ST-ZIP ILE	555 555 555 555 555		S TO OFF		☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
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