

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 29, 2002 8:00 am
Secretary of State

05-02-2002 90056 028 ***150.00

DOCUMENT # G 49788
1. Entity Name
HERITAGE CARPET & TILE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
410 S. MILITARY TRAIL
Suite, Apt. #, etc.

3. Mailing Address
410 S. MILITARY TRAIL
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
DEERFIELD BCH, FL
Zip 33442 Country USA

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Zip 33442 Country USA

4. FEI Number 59-2415005 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Jeri Anne Smith
Street Address (P.O. Box Number is Not Acceptable)
22645 Caravelle Circle
City Boca Raton FL Zip Code 33433

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.

SIGNATURE [Signature] Jeri A. Smith 5-15-02
Signature of or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	(P) President Rundo Smith 22645 Caravelle Circle Boca Raton FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(VP) Vice Pres. Rundo Smith 500 Phillips Drive Boca Raton FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(VP) Vice Pres. Brenda Smith 9669 Via Amie Boca Raton FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(JST) Vice Pres./Secretary Treasurer Jeri Anne Smith 22645 Caravelle Circle Boca Raton FL 33433
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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowerment.

SIGNATURE: [Signature] 4-11-02
Signature and typed or printed name of signing officer or director Date

Daytime Phone #

CR2E034B (12/01)