

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G73289

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** SMIDS CARPETS & INSTALLATION INCORPORATED

**Current Principal Place of Business:**

4596 LEXINGTON AVENUE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4596 LEXINGTON AVENUE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 59-2407645

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMID, JOHN R.  
5106 IMPERIAL COVE RD.  
JACKSONVILLE, FL 32210 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SMID, JOHN R  
Address: 5106 IMPERIAL COVE ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S  
Name: SMID, VICKI  
Address: 5106 IMPERIAL COVE RD.  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: VICKI R SMID

SEC

04/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date