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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H03630 CONTINENTAL CARPET CO., INC.

(1)

## **FILED** Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
1946 N.E. 5TH AVE. 1946 N.E. 5TH AVE. BOCA RATON FL 33431-7702					
BOCK RATOR	V FL 33431-7702	BOCA RATON FL 33431-7702			DO NOT WRITE IN THIS SPACE
Ì					3. Date Incorporated or Qualified
		. ,			05/15/1984
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
21		[26]			59-2557649 Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22 City & State		City & State			Fee Required
23		28			B. Election Campaign Financing     Trust Fund Contribution     Added to Fees
Zip Country		Zip Country		,	This corporation owes or has paid the current year Intangible
24	25	h	30		Personal Property Tax due June 30. Yes No
	g, Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Agent
EA	STHAM, JOHN K		81	Name	ne
134	8 W. PALMETTO PARK ROAD		82 Street Ac		et Address (P.O. Box Number is Not Acceptable)
ВО	ICA RATON FL 33432		L		
			83		
İ			84	City	85 Zip Code
				'	red corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
signature	m familiar with, and accept the obli- Signature, type-Locpondut name of repetited to OFFICERS AL				alure regulard when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		□ Change □ Addition
NAME	KAPNECK, NEIL E.		1.2 NAME		
STREET ADDRESS	1400 S. OCEAN BLVD		1.3 STREET	ADDRESS	is
CITY - ST - ZIP	BOCA RATON FL		1.4 CITY - 9	iT-ZIP	
TITLE		DELETE	21 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		35
CITY-ST-ZIP	DELETE		2. 4 CITY-	ST-ZIP	Change Addition
TITLE	···		3.1 TITLE 3.2 NAME		Change Li Audinor
NAME CZOSCI ADDOSOG			3.2 NAME 3.3 STREET	100000	
STREET ADORESS			3.3 STREET		
CITY-ST-ZIP TITLE			4.1 TITLE	31-211	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET	ADDRESS	is
CITY-S1-ZIP			4.4 CITY-S		
TITLE		DELETE	5 1 TITLE	_	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET	ADDRESS	is
CITY-ST-ZIP			5.4 DTY-5	67 - ZIP	-
TITLE		☐ DELETE	6.1 ITLE		Change Addition
NAME			6.2 AME		
STREET ADDRESS				ADDRESS	\$
CITY-ST-ZIP	L			ST-ZIP	tated in Section 119 07(3)(i) Florida Statutes further certify that the information

upplemental annual report is true and accurate a di that my signature shall have the same legal effect aff made under oath; that I am an or the receiver or truetory empowered to execute this report as required by Chapter 607, Florida Statute; and that my name appears in officer or director of the cell Block 12 or Block 13 if ctyl