FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
95 JUL 27 AM 9:13

DOCUMENT # **H10504** **(9)**

1. Corporate Name
GULFSTREAM CARPET, INC.

Principal Place of Business
3349 N FEDERAL HWY
3349 NORTH FEDERAL HIGHWAY
DELRAY BEACH FL 33483-6231
US

Mailing Address
3349 N. FEDERAL HWY
3349 NORTH FEDERAL HIGHWAY
DELRAY BEACH FL 33483-6231
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/02/1984**
3a. Date of Last Report: **03/04/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: **59-2449921** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LARUE, GLEN E
3349 NORTH FEDERAL HIGHWAY
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section(s) 607.0502 and/or 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(s) 607.0505, Florida Statutes.

SIGNATURE (Registered Agent signature required for agent change) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
31 Title	PO	41 Title	☐ Change ☐ Addition
32 Name	LA RUE, GLEN E	42 Name	300001547763
33 Street Address	1131 N. LAKESIDE DR.	43 Street Address	-07/27/95--01064--013
34 City St Zip	LAKE WORTH FL	44 City St Zip	****225.00 ****225.00
35 Title		45 Title	☐ Change ☐ Addition
36 Name		46 Name	
37 Street Address		47 Street Address	
38 City St Zip		48 City St Zip	
39 Title		49 Title	☐ Change ☐ Addition
40 Name		50 Name	
		51 Street Address	
		52 City St Zip	
		53 Title	☐ Change ☐ Addition
		54 Name	
		55 Street Address	
		56 City St Zip	
		57 Title	☐ Change ☐ Addition
		58 Name	
		59 Street Address	
		60 City St Zip	
		61 Title	☐ Change ☐ Addition
		62 Name	
		63 Street Address	
		64 City St Zip	

RC

14. To the best of my knowledge, information and belief, the statements made in this report are true and correct. I am a director or officer 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 an asterisk.

SIGNATURE: *Glen E LaRue* 6-12-95 407-737-2011

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — DATE — TELEPHONE NUMBER

0276506 CP