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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H18394

(7)

1. Corporation Name

ORIENTAL RUGS CENTER, INC.

Principal Place of Business

C/O BAHMAN AMINI
755 N.W. 72ND AVE. #10
MIAMI FL 33126

Mailing Address

C/O BAHMAN AMINI
755 N.W. 72ND AVE. #10
MIAMI FL 33126-3010

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

AMINI, BAHMAN
755 NW 72ND AVE. SHOWROOM #10
MIAMI FL 33126

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

08/28/1984

3a. Date of Last Report

03/04/1996

4. FEI Number

59-2555616

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 s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

BAHRAM AMINI

82 Street Address (P.O. Box Number is Not Acceptable)

755 NW 72ND AVE. #10

83

MIAMI, FL 33126

84 City

MIAMI

FL

85 Zip Code

33126

11. Pursuant to the provisions of Sections 607.0502 and 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME BAHRAM, AMINI
STREET ADDRESS 755 NW 72ND AVE. #10
CITY-ST-ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVTSDCM
1.2 NAME BAHRAM, AMINI
1.3 STREET ADDRESS 755 NW 72ND AVE #10
1.4 CITY-ST-ZIP MIAMI FL 33126

2.1 TITLE C
2.2 NAME PARVINE MOTAMED AMINI
2.3 STREET ADDRESS 755 NW 72ND AVE.
2.4 CITY-ST-ZIP MIAMI, FL 33126

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS

14. I do hereby certify that the information submitted 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 annual report or supplemental annual 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

BAHRAM AMINI

1/28/97

(305)
2617847

CR2E034 (9/96)