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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

J36321

(4)

CARPETS OF CENTRAL FLORIDA, INC.

Jan 22 1997 8:00am Secretary of State

FILED

3. Date Incorporated or Qualified 10/06/1986 01/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be	Principal Place of Business Mailing Address 1850 PROVIDENCE BLVD. SUITE IN DELTONA FL 32725 DELTONA FL 32725-3879					
2.						
Solic April 6 of Company Solic April 6 of Co			- 1	***		
Suite, Apr. in etc. Suite, Apr. in etc.			2a. Mayling Address	1.11.97	· ·	
Second Content Seco	Suite Apt	# etc		0701		CQ 75 Additional
28	22		<u></u> 7		5. Certificate of Status Desired	
Coupty Page Coupty Page Pag				Flavion		
10. Name and Address of Current Registered Agent	Zip	Country		Country	8. This corporation has liability to	r intangible tax under s. 199.032,
DISANO, JOSEPH J. 1880 PROVIDENCE BLVD. STORE 1128 ABELINE DR. DELTONA FL 32725 B2 Street Address (P.O. Box Number is Not Acceptable)	24 201 /04		12950 (0(8°648)	1301 APIDZIC		
1880 PROVIDENCE BLVD. STORE 128 ABELINE DR. DELTONA FL 32725 B3 Street Address (P.O. Box Number is Not Acceptable) B4 City	No.			81 Name	- 1/h	
11.28 ABELINE DR DELTONA FL 32725 B3 Set City FL St Zp Code City FL St Zp Co				99 Otroot Ada	SAME	a b la)
DELTONA FL 32725 11. Fursiant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent. I arm familiar with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE STORMAND Special floridation Statuto				52 Street Add	iress (P.O. Box Number is Not Accept	аре
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 agent, or both, in the State of Fiorida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered and agent. I hereby accept the appointment as registered and agent. I hereby accept the appointment as registered and agent. I hereby accept the appointment as registered and agent. I hereby accept the appointment as registered and agent. I hereby accept the appointment as registered and applications. I hereby accept the appointment as registered and advantage the ministering. 12. Whater I have a submit a purpose of Point as a submit and advantage the ministering. 12. By A City - St. ZP 12. By A City - St. ZP 12. By A City - St. ZP 13. STREET ADDRESS 14. City - St. ZP 14. City - St. ZP 15. A City - St. ZP 16. City - St.				83		
The provision to the provision of Socileris 607 (1502) and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the eppointment as registered agent, or hoth, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the eppointment as registered agent, or hoth, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the eppointment as registered agent, in the florida pagent. I am familiar with a director protein more or registered agent, or hoth, in the State of registered agent, or hoth, in the State of registered agent, or hoth. I am familiar with a sequence of registered agent, or hoth, in the State of registered agent, or hoth. I am familiar with a sequence of registered agent, or hother agent agent sequence agent signature requised when rentation(s). 12. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 12. NAME 12.		., ., .,		84 City		85 Zip Code
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 accepts the obligations of, Section 607 0506, Florida Statutes. SIGNATURE						
Signature Sign	office or r	registered agent, or both, in the State	of Florida, Such change was a	uthorized by the cornora	poration submits this statement for the ition's board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered
STOCK TO SECURITY OF THE CONTROL OF THE CONTROL OF THE CONTROL AGENCY STREET ADDRESS OF THE CONTROL OF THE CONT	agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Statutes.		· ' '
12.	SIGNATURE	DISANO, JOSEPH	ال الحر السلط	. Dra stand Acres signature	(and upper reignitation)	
TITLE	12.					
NAME DISANO, JOSEPH J. 12 NAME 13 STREET ADDRESS 14 CITY-ST-2P		r				
City - S1 - 2IP	NAME	DISANO, JOSEPH J.		1.2 NAME	•	Ì
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			[_] DETERE			LI GHANGE LIFE ACCITION

14. If do 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 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 or 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 on an attachment with an address.

6.4 CITY-ST-ZIP