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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

J40354

(9)

ALL FLORIDA CONTRACT CARPETS, INC.

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					i identità ditti atent delde tittel ettil ellet ellett	BISH GIBH GISH SI	1811 MEBEL 1881
3783 HARTSFIELD RD 3783 HARTSFIELD RD							
TALLAHASSEE FL 32303 TALLAHASSEE FL 32303					DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	<u></u>		
					10/30/1986		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		pplied For
21 3702	NORTHWEST PASSAGE				59-2731140	J	lot Applicable
Suite, Apt.							Additional
27					5. Certificate of Status Desired	Fee R	tequired
City & State	City & State	•		6. Election Campaign Financing	\$5.00	May Be	
	AHASSEE, FLORIDA 28 TALLAHASSE					to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the		
4 32303 25 USA 29 32303 30 9. Name and Address of Current Registered Agent				USA	Personal Property Tax due June 30.		) No
- DE		Hegistered Agent		81 Name	10. Name and Address of New Register	ed Agent	
FEAQUOIN, BOD							
3783 HARTSFIELD RD				82 Street Addr	Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32303							
l							
				84 City	E	85 Zip	Code
44 Durament I	o the provisions of Sections 607 0503	and CO7 1509 Florida Ctat	ulan tha s	hous population	poration submits this statement for the purpos		ia registered
office or re	egistered agent, or both, in the State of	Florida, Such change was	authorize	ed by the corporati	ion's board of directors. I hereby accept the	appointment as	registered
	m familiar with, and accept the obligati	ons of, Section 607.0505, F	Iorida Sta	tutes.			
SIGNATURE	Signature, typod or printed name of registered agent	and title if applicable (NC	)IF : Banislara	o Agent signature require	ed when reinstating) DAT	F	
12.	OFFICERS AND		13.	o rigorii signature redoni	ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
TITLE	Р	DELETE	1.1 T	ITLE		☐ Change	Addition
NAME	PEACOCK, BOB		1.2 N	IAME			
STREET ADDRESS	3783 HARTSFIELD ROAD		1.3 9	TREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL		1.40	CITY-ST-ZIP			
TITLE	DELETE		2.1 T	ITLE		Change	Addition
NAME			2.2 N	AME			
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NAME			5.2 N				
STREET ADDRESS			5.3 S	TREET ADDRESS			
CITY-ST-ZIP		F1 50.000		ITY-ST-ZIP		··· <del>····</del>	(*************************************
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NAME		<b>A</b>	6.2 N				
STREET ADDRESS		<u> </u>		TREET ADDRESS			
CITY-ST-ZIP		2/1	64 C	ITY-ST-ZIP	0	and or an	5-(
indicated in	enity mat the miernation supplied with on this agricual report of supplemental t	i this thing does not qualify annual report is true and ac	ior the ex curate an	emption stated in t d that my signatur	Section 119.07(3)(i), Florida Statutes. I further re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and th	certily that the under oath; th	at Lam an
officer or o	director of the corporation or the receiver Block 13 if changed are as at act	ver or trustee empowered to	execute	this report as requ	ired by Chapter 607, Florida Statutes; and th	at my name ap	pears in
DIOUR 12 C	a wasan is a cijangbu, proji ayi allagr	янож туман ауагог.					

PEACOCK

APRIL 27, 1998 (850) 574-0108