

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K44920 (2)
1. Corporation Name
GOLDCOAST CARPET SPECIFIERS & DESIGNERS INC.



*Principal Place of Business Mailing Address
% DANIEL L. HARDIN SR.
~~6223 16TH WAY S.~~
W. PALM BEACH FL 33415

3. Date Incorporated or Qualified **11/10/1988** 3a. Date of Last Report **02/02/1995**

2. Principal Place of Business 2a. Mailing Address
21 **6342 Forest Hill Blvd** 26 **6342 Forest Hill Blvd**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Suite 310** 27 **Suite 310**
City & State City & State
23 **W. Palm Beach FL** 28 **W. Palm Beach FL**
Zip Country Zip Country
24 **33415** 25 **USA** 29 **33415** 30 **USA**

4. FEI Number **65-0084557** 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

9. Name and Address of Current Registered Agent
HARDIN, DANIEL L., SR.
~~6223 16TH WAY SOUTH~~
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 **6342 Forest Hill Blvd**
Suite 310
84 City **W. Palm Beach** FL 85 Zip Code **33415**

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 title, if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1 ☒ DELETE
HARDIN, CHARLOTTE J
6223 16TH WAY SOUTH
W. PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP
2 ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
3 ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
4 ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
5 ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
6 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE **U.P.** ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE **Pres** ☐ Change ☒ Addition
2.2 NAME **Daniel L. Hardin**
2.3 STREET ADDRESS **6342 Forest Hill Blvd #310**
2.4 CITY-ST-ZIP **W. Palm Beach FL 33415**
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel L. Hardin

7/17/96

CR2E034 (3/96)