FILED Apr 30, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI 1. Corporation	MENT # K44920	ł						
	DAST CARPET SPECIFIERS	& DES	IGNERS INC.					
Principal Place	e of Business	Mail	ing Address			T (BOUGHI) BUT BYBI) DURIN IBUU ISUU BAUF DUBI	i diğil ətən bibil ə	1011 01611 1801
% DANIEL L. H	, "		aniël L. Hardin Sr.					
8331 PASADENA BLVD . B331 PASADENA RD.					DO NOT WINTE IN TH	;		
			PEMBROKE PINES FL 33024			DO NOT WRITE IN TH	S SPACE	
US	* * *	US				3. Date Incorporated or Qualifed 11/10/1988		
6 Division D	lead of Duck and	12-1	Mailing Address			4. FEI Number		plied For
	lace of Business	—————————————————————————————————————	Mailing Address			65-0084557		t Applicable
21 Suite, Apt.	# etc	26 S	Suite, Apt. #, etc.				\$8.75 A	
22	, , , , , ,	27	,			5. Certificate of Status Desired	Fee Re	quired
City & Stat	e .	$\overline{}$	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	o Fees
Zip	Country	Z	Zip	Country	7	8. This corporation owes the current year I		_/
24	25	29		30		Personal Property Tax.		☑ No
	9. Name and Address of Curren	t Registe	red Agent		T	10. Name and Address of New Registere	d Agent	
HAD	DIN, DANIEL L., SR.			81	Name			
				82	Street A	ddress (P.O. Box Number is Not Acceptable)		
8331 PASADENA BLVD PEMBROKE PINES FL 33024			•				<u> </u>	
LEM	BHORE FINES I C 33024			83	1			
				84	City	F	85 Zip C	Code
							_ , ,	registered
office of t	egistered agent or both in the State	of Florida.	. Such change was au	uthorized by	the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the app	ointment as re	gistered
agent. I a	m familiar with, and accept the obliga	tions of, S	ection 607.0505, Flor	rida Statutes	5.		**	
SIGNATURE	Signature, typed or printed name of registered ager		anticoble (NOTE	People and Acc	of eignature rec	guired when reinstating) DATE		
12.	OFFICERS AN		<u></u>	13.	- Signature req	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	VP .		☐ DELETE	1.1 TITLE			Change	Addition
NAME	HARDIN, CHARLOTTE J			1.2 NAME				
STREET ADDRESS	8331 PASADENA BLVD			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL			1.4 CITY-5	ST-ZIP			
TITLE	Р		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	HARDIN, DANIEL			2.2 NAME				
STREET ADDRESS	8331 PASADENA BLVD			2.3 STREE	TADORESS			
CITY-ST-ZIP	PEMBROKE PINES FL			2. 4 CITY-	ST-ZIP	<u> </u>		
TITLE	· ·		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME		Same i	مسيكة وتعدر وسيثها تارية	3.2 NAME			= *	·. • ·
STREET ADDRESS				3.3 STREE	TADDRESS			
CITY-ST-ZIP				3.4. CffY-	ST-ZIP			
TITLE			☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME				4. 2 NAME				;
STREET ADDRESS				4.3 STREE	TADDRESS			!
CITY-ST-ZIP			Closustr.	4.4 CITY-5	ST-ZIP		Change	☐ Addition
TITLE			☐ DELETE	5.1 TITLE			. Change	☐ Addition
NAME				5.2 NAME	TADORESS	·	•	İ
STREET ADDRESS	• • ;			5.3 STREE				
CITY-ST-ZIP			☐ DELETE	6.1 TITLE	V1-14.IF		☐ Change	Addition
TITLE				6.2 NAME)			_ '
NAME STREET ANDRESS	•				T ADDRESS			

CITY-ST-ZIP 14. I 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 distance employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changel, or of the exemption of the receiver or distance employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changel, or of the exemption of the receiver or distance employed in the exemption of the

6.4 CITY-ST-ZIP

SIGNATURE:

H. BUNGA