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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K46781

CARPET STYLES, INC.

(6)

FILED Mar 12 1998 8:00am Secretary of State

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Principal Place of Business		Mailing Address			i gantfitt filt nints dieth enbit ifter tibt difft sint difft dint dibt. Aint abbi	
3324 GRIFFIN ROAD		3324 GRIFFIN ROAD				
DANIA FL 33312		DANIA FL 33312			DO NOT MOITE IN THE ODAGE	
U\$		U\$			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 11/22/1988	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-0081425 Not Applicable	
Suite, Apt #, etc.		Suite, Ap1 #, etc.			5. Certificate of Status Desired S8.75 Additional	
22		27			Fee Required	
City & State		City & State			Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
YE/	ARWOOD, CHRISTOPHER		81	Name		
332	4 GRIFFIN ROAD		82	Ctroot	Address (P.O. Box Number is Not Acceptable)	
	NA FL 33312		02	Street	Address (F.O. Box Number is Not Acceptable)	
27#			83			
				L		
			B4	City	FL 85 Zip Code	
44 Dureupht	a the provisions of Science 607 000	and 607 1509 Florida Statut	on the show	e. pamod		
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 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.						
agent. Lar	n familiar with, and accept the obligat	ions of, Section 607.0505, Flo	orida Statute	S.		
SIGNATURE .						
	Signature, typed or printed name of registered agent OF LICERS AND			ent signature	Proquired when reinstating) DATE	
12.	DP OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
	YEARWOOD, CHRISTOPHER	ET DECEN			Change C Addition	
NAME	1997 SE 24TH AVE		1.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-	ST-ZIP		
TITLE	VT	DELETE	2.1 TITLE	l	Change Addition	
NAME	MELVIN, DONALD K		2.2 NAME			
STREET ADDRESS	1997 S.E. 24TH AVE.		2 3 STREET	r address		
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		2 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change L. Addition	
NAME			3.2 NAME	ļ		
STREET ADDRESS			3.3 STREE	ADDRESS		
CITY+ST-ZIP			3 4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	51 TiTLE		Change Addition	
NAME			5.2 NAME	į		
STREET ADDRESS				ADDRESS		
l				l l		
CITY-ST-ZIP		DELETE	5.4 CITY-1	21-ZIP	Change Addition	
TITLE		E) Merrie			Li Crienge Li Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	ADDRESS		
CITY-ST-ZIP			6.4 CITY - 5			
	ertify that the information supplied with	this filling does not qualify for	or the exemp	tion state	ed 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 eath; that I am a officer or director of the corporation or the ruceiver 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 attaching of with an address.

SIGNATURE: