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

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L35996

ASHLEY'S CARPET, INC.

(2)

FILED Mar 14 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address					P	01011 01011	81811 (891
66 S.W. SALER STUART FL 349		66 S.W. SALERNO ROAD STUART FL 34997-6242							
						3. Date Incorporated or Qualified 12/08/1989	3a. Date		Report
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address						pplied For
21		26	26			65-0164520 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	Fee Hequired		
City & State	e	City & State	- 			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip Country		Ζ φ	Zip Cou			8. This corporation has liability for intangible tax under s. 199.032,			
24			[30]	·1		Florida Statutes			
	9. Name and Address of Curr	ent Registered Agent		B1	Name	10. Name and Address of New Re	JISTOT AC	ent	
CAIN, STEVEN A.				["]					
	S.W. SALERNO ROAD ART 34997				Street Add	ress (P.O. Box Number is Not Acceptable)			
				83					
				84	City		FL	85 Zip	Code
		60 - 4 607 41 60 Florida Piat.	ten the e			poration submits this statement for the p		hanoing	ite registered
1 to enitte	to the provisions of Sections 607 0s registered agent, or both, in the Sta im familiar with, and accept the obl	te of Florida. Such change was i	aumonze	ส ถง	/ Inc corpora	tion's board of directors. Thereby accep	t the appoi	ntment as	s registered
SIGNATURE		7/2		i		red wher reinstating)	OATE		
12.	Signature typed or printed name of legistered a	ND DIRECTORS	13.	rı Mile	44 8 QUARTER TOULS	ADDITIONS/CHANGES TO OFFIC		IRECTO	RS IN 12
TITLE	VPT	DELETE	111	}[[· T			Change	
NAME	CAIN, STEVEN A.	-	12 N	AME	1				
STREET ADDRESS	66 SW SALERNO RD.		135	TREET	ADDRESS				
CiTY-ST-ZIP	STUART FL		140	IIY-S	i1 - 7 P				
TITLE		☐ DELETE	2 1 TJ	TL F		3		Change	Addition
NAME			2.2 N	AME					
STREET ADDRESS			2.3 \$	IREFT	ADDRESS				
CITY+ST-ZIP			2.40	HY-S	ST- ZIP				
TITLE		DELFTE	3.1 11	11LE			L	Change	Addition
NAME			3 2 N	AME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE			S1- 2IP		·	Change	Addition
TITLE		∟ DELETE	4.1 11				L.	Gridings	LJ AJURUN
NAME			4.21		IDDUCAGO				
STREET ADDRESS					ADDRESS 51 - ZIP				
CITY - ST - ZIP	<u> </u>	DELETE	511		1 - 715		T	Change	Addition
TITLE		L_J were to	52 N				•	3.	
NAME CAREET ARROPERS					ADDRESS				
STREET ADDRESS					ST-7IP				
CITY-ST-ZIP TITLE		DELFTE	54G 611		DI - [II			Change	Addition
NAME		Li ven te	62 N				-		
STREET ADDRESS					ADDRESS				
-					31 - ZIP				
CITY-ST-ZIP			■ 0.4 U	111.9		d in Castion 110 07/2)(1) Elevido Statuto	a. I direttizze e	actifu the	1 *ho

do hereby certify that the information supplied with this filing does not quality 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, I forida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

1-2097

288-4438