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 # **L49709** **(3)**

1. Corporation Name
RUG CRAFTS, INC.

Principal Place of Business	Mailing Address
7751 NE BAYSHORE COURT MIAMI FL 33138	7751 NE BAYSHORE COURT MIAMI FL 33138

3. Date Incorporated or Qualified: 02/07/1990
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21: 3126 N. 34th St.
22: Suite, Apt. #, etc.
23: City & State: Hollywood FL.
24: Zip: 33021 25: Country

2a. Mailing Address
26: 3126 N. 34th St.
27: Suite, Apt. #, etc.
28: City & State: Hollywood FL.
29: Zip: 33021 30: Country

4. FEI Number: ~~NOT APPLICABLE~~ 65-0180207 ☐ 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
STRADER, LISA K.
7751 N.E. BAYSHORE COURT
SUITE 4A
MIAMI FL 33138

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 3126 North 34th St.
83:
84 City: Hollywood FL 85 Zip Code: 33021

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: Lisa K Strader — Lisa K. Strader — 6/26/96
Signature, typed or printed name of individual with authority to sign (NOTE: If applicable, Agent's signature required and when reinstating) Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	STRADER, LISA K	
STREET ADDRESS	7751 NE BAYSHORE COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS	3126 North 34th Street	
14 CITY-ST-ZIP	Hollywood FL. 33021	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME	600001889666 -07/10/96--01042--025 ***225.00	
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (3/96)

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)(k), 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 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lisa K. Strader — Lisa K. Strader — 954-964-1900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

6/26/96