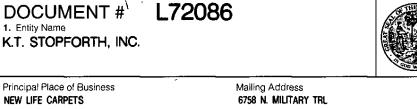
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)





FILED Apr 16, 2003 8:00 am Secretary of State

04-16-2003 90105 010 ***150.00

NEW LIFE CARPETS 6758 N MILITARY TR. S201 W PALM BCH FL 33407		6758 N. MILITARY TRL SUITE 201 WEST PALM BEACH FL 33407				10073941			
2. Principal Place of Business		3. Mailing Address					IL BIBLE BIBLE F	ITOTE BEGIN FEEL	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & Stat	de	City & State			4. 1	→ 65-01\U1626 → ·		pplied For ot Applicable	
Zip	Country Zip C		Count	ry			8.75 Ade	ditional	
	6. Name and Address of Current	Registered Agent			7. I	Name and Address of New Registered A	gent		
				Name					
PAINE, JE	FFREY A., ESQ.	Street Addre		ss (P.O. B	s (P.O. Box Number is Not Acceptable)				
1800 S AI	USTRALIAN AVE		0.000.7						
S205^		_							
W PALM I	BEACH FL 33409		City		_	FL	Zip Cod	le	
	tions of registered agent.			d office or reg		ent, or both, in the State of Florida. I am fa	miliar with,	and accept	
After Make Check	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of					9. Election Campaign Financing Trust Fund Contribution.	Added	May Be to Fees	
10.	OFFICERS AND	***	11.		AD	DITIONS/CHANGES TO OFFICERS AND I			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOPFORTH, KEITH 6758 N MILITARY TR, S204 W PALM BEACH FL	∠ □ Delete					□ Change	☐ Addition	
TITLE HAME STREET ADDRESS STY-ST-ZIP		☐ Delete					☐ Change	☐ Addition	
ITLE IAME TREET ADDRESS		☐ Delete		T ADDRESS			Change	Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	÷	Delete		T ADDRESS ST-ZIP			Change	Addition	
itle Iame Treet address . Hty-st-zip		☐ Delete		T ADDRESS ST-ZIP		I	Change	Addition	
ITLE IAME TREET ADORESS ITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP			☐ Change	Addition	

12. 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 report or supplemental 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, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-12-03