

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90049 029 ***150.00

DOCUMENT # M54693

1. Entity Name
MAC DONALD'S CARPET WAREHOUSE, INC.



Principal Place of Business
**3184 N.E. 12TH TERRACE
FT. LAUDERDALE, FL 33334**

Mailing Address
**3184 N.E. 12TH TERRACE
FT. LAUDERDALE, FL 33334**

40031414



03172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0138638

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**O'CONNELL, DAVID J.
3184 N.E. 12TH AVENUE
FT. LAUDERDALE, FL 33334**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME O'CONNELL, DAVID J.
STREET ADDRESS 3031 NE 12TH TER
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE STD
NAME O'CONNELL, BETTY A.
STREET ADDRESS 3031 NE 12TH TER
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE
NAME
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IN THIS SPACE**

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: *David J. O'Connell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 3/18/2005 954 463 0361

Date

Daytime Phone #