

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000100022

1. Entity Name

C & S CARPET, INC.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90132 036 ***158.75

Principal Place of Business

423 SUNSHINE DR
COCONUT CREEK FL 33066

Mailing Address

423 SUNSHINE DR
COCONUT CREEK FL 33066

00057814



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4403 W. Atlantic Blvd

Suite, Apt. #, etc.

Apt. 1029

City & State

Coconut Creek, FL.

Zip

33066

Country

U.S.

3. Mailing Address

4403 W. Atlantic Blvd

Suite, Apt. #, etc.

Apt. 1029

City & State

Coconut Creek

Zip

33066

Country

U.S.

4. FEI Number

65-1056664

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CALE, MICHAEL

423 SUNSHINE DR

COCONUT CREEK FL 33066

7. Name and Address of New Registered Agent

Name

Cale, Michael

Street Address (P.O. Box Number is Not Acceptable)

4403 W. Atlantic Blvd.

Apt. 1029

City

Coconut Creek

FL

Zip Code

33066

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/12/01
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME CALE, MICHAEL
STREET ADDRESS 423 SUNSHINE DR
CITY-ST-ZIP COCONUT CREEK FL 33066 ☐ Delete

TITLE ST
NAME SENI, MARCOS
STREET ADDRESS 423 SUNSHINE DR
CITY-ST-ZIP COCONUT CREEK FL 33066 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Cale, Michael
STREET ADDRESS 4403 W Atlantic Blvd. Apt. 1029
CITY-ST-ZIP Coconut Creek, FL. 33066 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Cale
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/01
Date

(954) 465-7408
Daytime Phone #

0131814

CR2E034 (10/00)