

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115136

FILED
Apr 26, 2005
Secretary of State

Entity Name: DENNIS JONES CARPET RESTORATION, INC.

Current Principal Place of Business:

15589 KEYLIME BLVD.
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

15589 KEY LIME BLVD.
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 65-1062195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DENNIS
15589 KEYLIME BLVD.
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, DENNIS
Address: 15589 KEYLIME BLVD.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S () Delete
Name: THOMPSON, OMAR
Address: 15589 KEYLIME BLVD.
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS JONES

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date