

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116196

FILED
Jan 27, 2004
Secretary of State

Entity Name: CARPET & RUG CREATIONS, INC.

Current Principal Place of Business:

35 WALTER MARTIN ROAD
FT WALTON BEACH, FL 32548

New Principal Place of Business:

35 WALTER MARTIN ROAD NE
FT WALTON BEACH, FL 32548

Current Mailing Address:

PO BOX 2527
FORT WALTON BCH, FL 32549

New Mailing Address:

FEI Number: 59-3688374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, MELBA J
35 WALTER MARTIN ROAD
FT WALTON BEACH, FL 32548

Name and Address of New Registered Agent:

POOLE, MELBA J PRES
35 WALTER MARTIN ROAD NE
FT WALTON BEACH, FL 32548

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: MELBA POOLE

01/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: POOLE, MELBA
Address: PO BOX 2527
City-St-Zip: FT WALTON BEACH, FL 32549

Title: DV () Delete
Name: POOLE, JACKIE R
Address: PO BOX 2527
City-St-Zip: FT WALTON BEACH, FL 32549

Title: DV () Delete
Name: JORDON, JENNIFER L
Address: 50 SELLERS PLACE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DV () Delete
Name: JORDAN, ANDY L
Address: 50 SELLERS PLACE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: POOLE, MELBA J PRES
Address: PO BOX 2527
City-St-Zip: FT WALTON BEACH, FL 32549

Title: DV (X) Change () Addition
Name: POOLE, JACKIE R VP
Address: PO BOX 2527
City-St-Zip: FT WALTON BEACH, FL 32549

Title: DV (X) Change () Addition
Name: JORDON, JENNIFER L VP
Address: 50 SELLERS PLACE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DV (X) Change () Addition
Name: JORDAN, ANDY L VP
Address: 50 SELLERS PLACE
City-St-Zip: FORT WALTON BEACH, FL 32548

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: MELBA J POOLE

PRES

01/27/2004

Electronic Signature of Signing Officer or Director

Date