## **7 2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

**FILED** Jun 05, 2003 8:00 am Secretary of State 05-05-2003 91879 027 \*\*\*150.00

1. Entity Name VAN'S CARPET & UPHOLSTERY CI	JOT 10240 LEANING SERVICE; INC.		000101	u g
Principal Place of Business 1991 PINE VALLEY OR PAISLEY FL 32767  LL 1999 2. Principal Place of Business	Meiling Address 1994 PINE VALLEY DR PAISLEY FL 32767 LL\QQQ	ValleyTX		
Tasa, FL	City & State	L	CHECK HERE IF MAKING C	CHANGES Applied For
32767 Zio		Country A.		Not Applicable  8.75 Additional be Required
VANGORDER, NY 1964 PINE VALLEY DR 14000 PAISLEY FL 32767 POLSE	Rive Valley D 4, FL 32767	Name Street Address (	7. Name and Address of New Registered Ag P.O. Box Number is Not Acceptable)	
8. The above named entity submits this statement the obligations of registered agent.  SIGNATURE Signature, typed or printed name of registered agent.  FILE NOW!!! FEE IS \$150.00	MGCOOLEN (NOTE: Per	istered office or register	4/30	s5.00 May Ba
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department  10. OFFICERS AN	P .	11.	Trust Fund Contribution.	Added to Fees
TITLE VANGORDER, IVY STREET ADDRESS 19040 RAVENWOOD RD CITY-ST-ZIP ALTOONA FL 32702	Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY - ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Dejetø	NAME STREET ADDRESS CATY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	C	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change 🗋 Addition
I hereby certify that the information supplied windicated on this report or supplemental report of the corporation or the receiver or trustee emchanged, or on an attachment with an address.	th this filing does not qualify for the is true and accurate and that my si powered to execute this report as re, with all other like empowered.		ction 119.07(3)(I), Florida Statutes. I further certify ame legal effect as if made under oath, that I ame, Florida Statutes; and that my name appears in 8I	that the information an officer or director ock 10 or Block 11 if

FTD ADDRESS CHANGE	Employer Identification Number (EIN) OMB No. 1545-0257
An address change here changes your address on the FTD coupons only.	59-3706935 151012 5 6
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State Zip	INTERNAL REVENUE SERVICE CENTER
Form 8109-C (Rev. 12-2000)	Send FTD Address Change and correspondence to the IRS address above