DOCUMENT,# P0100050445  1. Entity Name NAPLES BEST CARPET SERVICE, INC.					Secretary of State 09-11-2002 90102 018 ***150.00
Principal Place of Business Mailing Address 691 987H AVE NORTH NAPLES FL 34108 NAPLES FL 34108			<u>,                                      </u>		B0137430
2. Principal F	3. Mailing Address	ne .			
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
	LES, FW	City & State		A	-4-FEI Number Applied For Not Applicable
3412		Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current R	egistered Agent	Name	7	7. Name and Address of New Registered Agent
ZAMBRANO, PEDRO E				ress (P.C	.O. Box Number is Not Acceptable)
691 98TH AVE NORTH NAPLES FL 34108					
	E 04100		329 City		- 5th AVE. N. W.
8. The above	named entity submits this statement for t	he purpose of changing its re		NY distand	<b>ア PL E</b> Side <b>FL P P P P P P P P P P</b>
the obligat	tions of registered agent.	no parpose of enanging he re	gistered office of reg	gistered	d agent, or both, in the state of Florida. Tarri familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: F	Registered Agent signature re	equired whe	rhen reinstating) DATE
9. This corpo	oration is eligible to satisfy its Intangible		FEE IS \$550.00		
Tax filing r	requirement and elects to do so.	After September 13, 2 Make Check Payable	2002 Fee will be \$	750.00	
11.	OFFICERS AND DI		12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAMBRANO, PEDRO E 691 98TH AVE NORTH NAPLES FL 34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
IITLE NAME Street address Dity-st-zip.	D ZAMBRANO, MARCELA 691 98TH AVE NORTH NAPLES FL-34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	*****	☐ Change ☐ Addition
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
ITLE Ame Treet address ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Change ☐ Addition
TLE Ame Treet address ITY-ST-ZIP		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Change ☐ Addition
3. I hereby co	ertify that the information supplied with thi	s filing does not qualify for the		n Section	on 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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

5-30-02 (239) 304-1568

attachments #PUIOOUOSO445

## NAPLES BEST CARPET SERVICE, INC. 3291 - 5th AVENUE N.W. NAPLES, FL 34120 (239) 304-7568

September 3, 2002

Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Re:

Document No. P01000050445 2002 Uniform Business Report

Gentlemen:

The original Report was mailed to an old address. The enclosed report was finally forwarded to the new address. Upon receipt, I called the Division of Corporations to explain the problem, I was told to write this letter explaining the situation and to send it in with the \$150.00.

Check number 1517, in the amount of \$150.00, is enclosed to cover this report.

Thank you.

Sincerely,

Marcela Zambrano

Director

/rr

**Enclosures**