2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P02000096712

Entity Name: CARPETSTONES OF NORTH AMERICA, INC.

Current Principal Place of Business:

100 W LIVINGSTONE ST., SUITE 200
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

100 W LIVINGSTONE ST., SUITE 200
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 75-3098967 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARMENING, W.A. II
100 W LIVINGSTONE ST., SUITE 200
ORLANDO, FL 32801 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: HARMENING, W.A. II
Address: 100 W LIVINGSTONE ST., SUITE 200
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: KURTZ, RUBIN
Address: 62 TALBOT RD
City-St-Zip: TORONO, OT

Title: D ( ) Delete
Name: FREIBERG, DAVID A
Address: #3 WINTERPORT COURT
City-St-Zip: TORONTO, OT

Title: D ( ) Delete
Name: SHUFORD, WILLIAM T
Address: 518 LILLIAN DR.
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: W.A. HARMENING II PR 04/30/2004

Electronic Signature of Signing Officer or Director — Date