

FILED  
Aug 15, 2003 8:00 am  
Secretary of State

08-15-2003 90079 005 \*\*\*150.00

2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000121034

1. Entity Name  
NS CARPET & TILE INC



90150546

Principal Place of Business  
228 WATERSIDE DRIVE  
INDIAN HARBOUR BEACH, FL 32937

Mailing Address  
228 WATERSIDE DRIVE  
INDIAN HARBOUR BEACH, FL 32937

2. Principal Place of Business  
2151 N STATE RD 7  
Suite, Apt. #, etc.

3. Mailing Address  
2151 N STATE RD 7  
Suite, Apt. #, etc.

City & State  
MANASSA FL  
Zip  
33063

City & State  
MANASSA FL  
Zip  
33063



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number  
250437229  
Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
SACCO, NICK  
228 WATERSIDE DRIVE  
INDIAN HARBOUR BEACH, FL 32937

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
2151 N STATE RD 7  
City  
MANASSA FL Zip Code  
33063

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when registering) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$650.00  
Amended UBR is \$81.25  
Make Check Payable to: Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SACCO, NICK 228 WATERSIDE DRIVE INDIAN HARBOUR BEACH, FL 32937
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2151 N STATE RD 7 MANASSA FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS SACCO  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 8/11/03 Daytime Phone 514-975-6741

CR2E034 (10/02)

*Attachment*

**Gerald M. Pepper & Associates, P.A.**

**Certified Public Accountants**

**MEMBER**

American Institute of Certified Public Accountants  
Florida Institute of Certified Public Accountants  
New York State Society of Certified Public Accountants

Colonial Place, Suite 114  
1515 University Drive  
Coral Springs, Florida 33071  
(954) 755-5007

AUGUST 7, 2003

UNIFORM BUSINESS REPORT  
DIVISION OF CORPORATIONS  
PO BOX 1500  
TALLAHASSEE FL 32302

*90150546*  
*#P02000121034*

RE: NS CARPET & TILE INC  
P02000121034

GENTLEMEN:

ENCLOSED IS THE 2003 UNIFORM BUSINESS REPORT OF THE SUBJECT CORPORATION. MY CLIENT NEVER RECEIVED THE ORIGINAL NOTICE DUE TO HIS ADDRESS CHANGE. HAD HE RECEIVED THE ORIGINAL NOTICE, THE REPORT ALONG WITH THE FILING FEE WOULD HAVE BEEN SENT IN TIMELY.

MY CLIENT IS A NOT HAVING A GOOD YEAR AND IT WOULD BE A FINANCIAL HARDSHIP TO HAVE TO PAY THE PENALTY. ACCORDINGLY ENCLOSED IS THE ANNUAL REPORT, ALONG WITH THE FILING FEE OF \$150.00. IT IS THEREFORE RESPECTFULLY REQUESTED THAT THE PENALTY BE ABATED AND THE ANNUAL REPORT BE ACCEPTED AS FILED.

VERY TRULY YOURS,  
GERALD M. PEPPER & ASSOCIATES PA

*[Signature]*  
GERALD M. PEPPER CPA