


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2004 8:00 am
Secretary of State

04-30-2004 90396 003 ***150.00

DOCUMENT # P03000133892																																																											
1. Entity Name JOE VERNI'S CARPET SERVICE INC																																																											
Principal Place of Business 3612 W PEARL AVENUE TAMPA, FL 33611 US			Mailing Address PO BOX 15717 TAMPA, FL 33684-5717 US																																																								
2. Principal Place of Business			3. Mailing Address																																																								
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																								
City & State			City & State																																																								
Zip	Country	Zip	Country	4. FEI Number 20-0399477																																																							
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																							
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																							
VERNI, RALPH J 3612 W PEARL AVENUE TAMPA, FL 33611				Name																																																							
				Street Address (P.O. Box Number is Not Acceptable)																																																							
				City																																																							
				FL Zip Code																																																							
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 <u><i>Ralph J Verni</i></u> Ralph J. VERNI <u>4/27/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">10. OFFICERS AND DIRECTORS</th> <th colspan="3">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS CITY-ST-ZIP</td> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS CITY-ST-ZIP</td> </tr> <tr> <td></td> <td>VERNI, RALPH J</td> <td>3612 W PEARL AVENUE TAMPA, FL 33611</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	STREET ADDRESS CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS CITY-ST-ZIP		VERNI, RALPH J	3612 W PEARL AVENUE TAMPA, FL 33611																																							
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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 full other like empowered.																																																											
SIGNATURE: <u><i>Ralph J Verni</i></u> Ralph J. VERNI <u>4/27/04</u> <u>813-8312484</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone</small>																																																											

66425045



01052004 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 *Ralph J Verni* **Ralph J. VERNI** 4/27/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS CITY-ST-ZIP
	VERNI, RALPH J	3612 W PEARL AVENUE TAMPA, FL 33611			

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SIGNATURE: *Ralph J Verni* **Ralph J. VERNI** 4/27/04 813-8312484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone