

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154488

FILED
Apr 29, 2005
Secretary of State

Entity Name: MIKE'S CARPETS OF BRANDON, INC.

Current Principal Place of Business:

905 HILLSIDE TERRACE
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

905 HILLSIDE TERRACE
BRANDON, FL 33511

New Mailing Address:

FEI Number: 14-1901107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, ROBERT
2901 W. BUSCH BLVD. SUITE #1005
TAMPA, FL 33618 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: PRES () Delete
Name: UNDERWOOD, MICHAEL L JR
Address: 905 HILLSIDE TERRACE
City-St-Zip: BRANDON, FL 33511 US

Title: VP (X) Delete
Name: EASTERLING, MICHAEL W
Address: 11010 US HWY 301 S
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MICHAEL UNDERWOOD

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

Date