## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000001801

**FILED** Feb 22, 2005 Secretary of State

Entity Name: CARPETS BY LAINES & ASSOCIATES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1624 CAMERBUR DR ORLANDO, FL 32805 US **Current Mailing Address: New Mailing Address:** P O BOX 227455 MIAMI, FL 331227455 FEI Number: 59-3776826 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEGALZOOM NEVADA INC 44 W. FLAGLER ST. SUITE 675 MIAMI, FL 33130 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition LAINES, SANTOS ADILIO LAINES, SANTOS ADILIO Name: Name: 1624 CAMERBUR DR 10305 NEW HAMPHIRE AVE. Address: Address:

City-St-Zip: ORLANDO, FL 32805 US City-St-Zip: SILVER SPRING, MD 20905 US

Title: TREA () Delete Title: () Change () Addition

Name: LOPEZ, JOSE M Name: 1624 CAMERBUR DR Address: Address: ORLANDO, FL 32805 US City-St-Zip: 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: JOSE M. LOPEZ 02/22/2005 TREA