2008 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET AUORESS

CITY-ST-ZIP

TITLE

FILED May 19, 2008 8:00 am Secretary of State

☐ Change ☐ Addition

1. Entity Nam	MENT # <u>P04000056</u> carpet installer, inc.			05-19-2008	90036 027 ***15	50.00	
Principal Plac	e at Business	Mailing Address		Q.~ -			
1108 NW 22 CAPE CORAL		1108 NW 22ND PLACE CAPE CORAL, FL 33993					
0.11 2 00/11/2		0111 E 00101E; 1 E 00000			. 30 111 313 11 33111 33117 33 111	: BB(B) SIVIS SIVIS JSIVA JSIQS M	11 88 1 II 1 88 1
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address					
2001 NW 3rd AVE ZOOI NW 3		3rd Ave			BRIDT BITLE BILLD IBIIO IBISE E		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		02052008	Chg-P	CR2E034 (12/06)	
City & State		City & State		4. FEI Numb		<u> </u>	plied For
Zip	CORAL FL Country	CAPE CORA	Country	56-246		□ \$8.75 Add	ot Applicable
339	93 USA	33993	UŚA	5. Certificate	of Status Desired	Fee Require	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name o							
ARIAS, MARIA A HEIAS					ARIA A	<u>, </u>	
1108 NW 22ND PLACE CAPE CORAL, FL 33993				dress (P.O. Bóx Numb ZOOL WW	er is Not Acceptable 3rd Av		
City CAPE CORAL FL Zip Code 33993							
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. Fam familiar with, and accept							
the obligations of registered agent. SIGNATURE + Maria a arios SECRETARY 02/05/08							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE)	PECIZETA Registered Agent signature	e required when reinstating)		02/05/09	<u> </u>
		0. 5(per				
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaig Trust Fund Contrib		\$5.00 May Be			
10. OFFICERS AND DIRECTORS 11.				Added to Fees			
	OFFICERS AND			Added to Fees	/CHANGES TO OFFI	CERS AND DIRECTOR	S IN 11
TITLE	D		11.	Added to Fees ADDITIONS		CERS AND DIRECTOR	S IN 11
NAME	D FLORES, MIGUEL A	DIRECTORS	11. TITLE NAME	Added to Fees ADDITIONS P FLORES, MI	GUEL A		
	D	DIRECTORS	11. FIILE NAME STREET ADDRESS	Added to Fees ADDITIONS P FLORES, HI ZOOI NW 3	GUEL A ord AVE	Change	
NAME STREET ADDRESS	D FLORES, MIGUEL A 1108 NW 22ND PLACE CAPE CORAL, FL 33993 ST	DIRECTORS	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees ADDITIONS P FLORES, HI ZOOI NW 3 CAPE COG	GUEL A ord AVE EAL, FL 33	Change	
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NAME STREET ADDRESS CITY-ST-ZIP TITLE	D FLORES, MIGUEL A 1108 NW 22ND PLACE CAPE CORAL, FL 33993 ST	DIRECTORS Delete	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS Z	Added to Fees ADDITIONS P FLORES, HI ZOOI NW 3 CAPE COG ST ARIAS, HAI	GUEL A ord AVE RAL, FL 33 RIA A Ord AVE	⊠ Change 3993 ⊠ Change	Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 eath; 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.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE: Light a curing OZ/05/08 (239)440-977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR