

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 30, 2005 8:00 am
Secretary of State

08-30-2005 90031 017 ***150.00

DOCUMENT # P04000070892

1. Entity Name

STEVEN MCGUINN CARPET, INC.



Principal Place of Business
**4711 E LINEBAUGH AVE
TAMPA FL 33617**

Mailing Address
**4711 E LINEBAUGH AVE
TAMPA FL 33617**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E034 (5/05)

4. FEI Number

83-0393691

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MCGUINN, CHARLES
412 E HAMILTON AVE
TAMPA FL 33604**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 7, 2005

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

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
STEVEN MCGUINN CARPET ☐ Delete
STEVEN MCGUINN INC.
4711 E. LINEBAUGH AVE **(P)**
TAMPA, FL 33617

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
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☐ Change ☐ 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: *Steven P. McGuinn*

8-24-05 (813) 495-1531

ATTACHMENT

57064084
P04000070892

Dear,
Division of Corporations.
of waiver the \$400.00
late fee. For, I had
no idea I'd owe this.
and did not know that
information.

My Corporation is this

ME - Steven McGuinn.

MY TOOLS -

MY VAN.

NO Employees, NO
Directors, and no -
officers.

JUST ME. Trying to
earn a living.

Steven P. McGuinn

ATTACHMENT

50064084
#P04000070892

I Have my liability
with STATE Farm.

I Have my Business
license - my EIN.

My INC. Doc. #

P04000070892

I have anything Else
you need from me.

I'm just me, my tools
and my van.

and I'm Embarrassed
to tell you how much
I've made.

But I'm Trying
Bless me please.

Steven McGuinn

