2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000073767 1. Entity Name A-CAR CARPET INSTALATIONS, INC.



FILED May 02, 2008 08:00 Al Secretary of State

Principal Place of Business

131 NW 68TH STREET FORT LAUDERDALE, FL 33309 Mailing Address

131 NW 68TH STREET FORT LAUDERDALE, FL 33309



DO NOT WRITE IN THIS SPACE

04282008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARDOSO, ADALBERTO A 131 NW 68TH STREET FORT LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prions of registered agent.	urpose of changing its registered	d office or registered agent, or bot	h, in the State of Florida. I am familiar with, and	accept
SIGNATURE_	Signature, typed or printed name of registered agent and little if	applicable (NOTE: Registered	Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			sing \$5.00 May Be Added to Fees		,:
10.	OFFICERS AND DIREC	TORS	<u> </u>	ا المراوية على المراوية المرا المراوية المراوية الم	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARDOSO, ADALBERTO A 131 NW 68TH STREET FORT LAUDERDALE, FL 33309				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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					

12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes, I lutrier 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 of 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.28.08 (754) 422-1949

Daytime Phone #