## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 19, 2005 8:00 am Secretary of State 03-21-2005 90071 013 \*\*\*150.00

DOCUMENT # P04000101429  1. Entity Name USA CARPET & TILE INC						:	03-21-200		013	130.00	
Principal Place of Business 12025 SE 484 HWY BELLEVIEW, FL 34420			Mailing Address 12025 SE 484 HWY BELLEVIEW, FL 34420			eentres,					
2. Principal P	lace of Busi	ness	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03162005	Chg-P	CR2EO	34 (10/03)		
City & State			City & State			4. FEI Numb	854512	6	<u> </u>	pplied For ot Applicable	
Zip		Country	Zip	Cour	htry	5. Certificate	of Status Desired		\$8.75 Ad Fee Require	ditional ed	
	6, Nam	e and Address of Current	Registered Agent,		Name	.7Name and	Address of New R	egistered A	igent -		
-RAMOS, Y 10510 SW	47 AVE			Street Adda			s (P.O. Box Number is Not Acceptable)				
OCALA, FL 34476					6130	3016	3940				
		<u> </u>				بهالا		FL	Zip Coo	<u> </u>	
the obligat		ly submits this statement stered shent	or the purpose of changing it	s register	ed office or registe	red agent, or bo	th, in the State of Fic 3/1:	orida. 1 am 1 5/05	amiliar with	, and accept	
SIGNATURE_	Signature, type	d or printed name of registered agent	and use if applicable. (NO	TE: Regulere	id Agent eignature requires	d when reinstating)		DATE			
		FEE 13 \$150.00 IS Fee will be \$550.	9. Election Campa Trust Fund Con			.00 May Bo led to Fees					
10.	Р	OFFICERS AND	DIRECTORS Detects	tt.		ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	12025 SE	EZ, FRANCISA E 484 HWY EW, FL 34420	<del></del>	1	EET ADDRESS -ST-ZIP						
TITLE NAME STREET ADDRESS	V ABREU, 12025 SE	DAYAMI E 484 HWY	(SK Delete	TITL! NAM STRE	E IE EET ADORESS	<u> </u>			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS	BELLEVI	EW, FL 34420	☐ Delete	TITL NAM			-		Change .	Addition	
CTTY-ST-ZIP		· · - · · · · · · · · · · · · · · · · ·	☐ Delete	CITY	-\$1-20*				☐ Change	☐ Addilion	
NAME STREET ADDRESS CITY-ST-ZP				STRE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Deleta .						Change .	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		. •	☐ Deleta	TITLE NAME STREET					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: Dales Ca \$3 HOURS OF DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR DESCRIPTION DESCRIPTION OF DIRECTOR DIRECTOR											