

03-05-2007 90045 029 ***150.00

P04000158759

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED****07 MAR 14 AM 9:35**SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000158759

1. Entity Name
OLIVER CARPET, INC.Principal Place of Business
6873 SW 16TH COURT
N LAUDERDALE, FL 33068Mailing Address
6873 SW 16TH COURT
N LAUDERDALE, FL 33068

02232007 No Chg-P CR2E034 (11/05)

07

DO NOT WRITE IN THIS SPACE4. FEI Number
20-1935560Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NOFIL, JOSEPH K PA
3284 N STATE RD 7
LAUDERDALE LAKES, FL 33319**DO NOT WRITE
IN THIS SPACE**

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 re-stating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**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
PST
GRAJALES, OLIVER
6873 SW 16TH COURT
N LAUDERDALE, FL 33068TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**DO NOT WRITE
IN THIS SPACE**

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 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: *Oliver Grajales*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

II-2707

Date

Daytime Phone #