

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90008 024 ***150.00

DOCUMENT # P38907

1. Corporation Name

KAUFMAN MEASURING & CARPET SERVICES, INC.

Principal Place of Business

18 W. MORNING VIEW DR.
EUSTIS FL 32726
US-

Mailing Address

18 W. MORNING VIEW DR.
EUSTIS FL 32726
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/15/1992

4. FEI Number

06-1287926

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 2780 Privada Drive
Suite, Apt. #, etc.

2a. Mailing Address

26 2780 Privada Drive
Suite, Apt. #, etc.

City & State

23 Lady Lake FL

City & State

28 Lady Lake FL

Zip Country

24 32159

Zip Country

29 32159

9. Name and Address of Current Registered Agent

KAUFMAN, JOYCE V.
18 W. MORNING VIEW DR.
EUSTIS FL 32726

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2780 Privada Drive

83

84 City Lady Lake

FL

85 Zip Code

32159

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE CPT ☐ DELETE

NAME KAUFMAN, JOYCE V.
STREET ADDRESS 18 W. MORNING VIEW DR.
CITY-ST-ZIP EUSTIS FL

TITLE DS ☐ DELETE

NAME KAUFMAN, RALPH
STREET ADDRESS 18 W. MORNING VIEW DR.
CITY-ST-ZIP EUSTIS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

2780 Privada Drive
Lady Lake FL 32159

1.4 CITY-ST-ZIP

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2780 Privada Drive
Lady Lake FL 32159

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 30, 1999 352255-0830
Date Daytime Phone #

CR2E034 (11/98)