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PROFIT
CORPORATION
ANNUAL REPORT
1997

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200008188 (4)

PROFESSIONAL CARPET INC.

Principal Place of Business Mailing Address 381 NW 41ST AVE4 382 N.W. 41 AVENUE SUITE 210 DEERFIELD BEACH FL 33442-8045 **DEERFIELD BEACH FL 33442** 3. Date Incorporated or Qualified 3a. Date of Last Report 11/30/1992 08/08/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0372503 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Added to Fees Trust Fund Contribution Zip Country This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRESCI, JOHN 382 N.W. 41 AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) DEERFIELD BEACH FL 33442 83 84 City 85 Zip Code 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. JOHN SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition 1 1 TITLE CRESCI, JOHN NAME 1.2 NAME 382 N.W. 41 AVENUE STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 TITLE CRESCI, IRAYNA NAME 2.2 NAME 382 N.W. 41 AVENUE STREET ADDRESS 2.3 STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP 2. # CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-S1-ZIP TITLE DELETE 4.1 THE Change Addition NAME 4 P NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP

14. I do 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 eath; 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.

6.4 CiTY - ST - ZiP

6 3 STREET ADDRESS

61 IIIIE

6.2 NAME

DELFTE