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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000011065 (9)

SOUD'S QUALITY CARPETS, INC.

FILED Jan 22 1998 8:00am Secretary of State

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28 29 30 Personal Property Tax due June 30. \$\frac{1}{2}\text{ or personal Property Tax due June 10. \$\frac{1}{2} or personal Property Tax d							Trust Fund Contribution		Adde	d to Fees	╛
9. Name and Address of Current Registered Agent SOUD, WCTOR 8030-8 PHILLIPS HIGHWAY JACKSONVILLE FL 32256 82 84 City FL 85 Interest Address (P.O. Box Number is Not Acceptable) 86 87 88 88 84 City FL 88 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered differ or registered agent, or both in the State of Profice Scatch change are activitized by the corporation's board of directors, I hereby accept the appointment as registered differ or registered agent, or both in the State of Profice Scatch change are activitized by the corporation's board of directors, I hereby accept the appointment as registered differ or registered agent agent and the registered agent agent and the registered agent agent appointment as registered agent			├ ๆ ` ⊦	_	or this corporation owes of head paid the content year intents						1
SOUD, VICTOR 8030-8 PHILIPS HIGHWAY JACKSONVILLE FL 32256 82 Street Address (P.O. Box Number is Not Acceptable) 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 agent. I arm familiar with, and accept the obligations of, Section 607:0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SOUD, JR., VICTOR J 12. OFFICERS AND DIRECTORS 1 13. DP DELETE 1:1 TITLE SOUD, JR., VICTOR J 3420 EXCASUBER WAY EAST 1:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL OFFICERS AND 9360 CRAVEN ROAD, #405 2:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 2:1 TITLE SOUD, DEBBER 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE SOUD, DEBBER 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:2 MARE 4:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:3 STREET ADDRESS CITY-51-2P JACKSONVILLE FL DELETE 3:1 TITLE 3:4 TITLE 3	24		<u> </u>	30				<u> </u>	<u> </u>	<u> </u>	4
8030-8 PHILIPS HIGHWAY JACKSONVILLE FL 32256 82 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 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. South change was authorized by the corporation's board of directors. I hereby accept the appointment as registered segent, in minimal with, and accept three objections 607.0505, Priorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered segent in minimal with, and accept three objections of Sections 607.0505, Priorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered segent in minimal with, and accept three objections of Section 607.0505, Priorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered segent in minimal with, and accept three objections of Sections 500.050 and 500.050 an	<u> </u>		Hegistered Agent		-1 N1		10. Name and Address of New R	egistered /	tgent		┨
JACKSONVILLE FL 32256 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807 0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Portida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Portida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Portida. Statutes. SIGNATURE SIGNATURE SIGNAT TURE OPFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. NAME SOUD, JR., VICTOR J 3420 EXCALIBER WAY EAST 340 EXCALIBER WAY EAST 350 CRIY-ST-ZP TITLE DVP DELETE 17. TITLE DVP DELETE 2 17. TITLE DVP ATTER, SAM ATTER, SAM 22. NAME 3360 CRAVEN ROAD, #405 3420 EXCALIBER WAY EAST 3420 EXCALIBER WAY EAS				ľ	ı ıvan	e					ł
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Signature, hyped or jointent dayers and life if agoptication. (NOTE: Registrated Agort signature required when instituting) DATE	1		•								
TITLE	JIGNATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent signat	re required	when reinstaling)	DATE] {
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		ertify that the information supplied with	this filing does not qualify for			ted in Se	ection 119.07(3)(i), Florida Statutes. I	further cer	tify that th	ne information	

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 chapter 6 or on an attachment with an address.

SIGNATURE:

fam the INSAMERTIEF

1-13-98

1-904-730-4152