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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000011509 (6)

PENTHOUSE RUGS, INC.

FILED Apr 15 1998 8:00am Secretary of State

Principal Place of Business Meiling Address								-	Ji dara i ile	(8) (1 86) 3 ((1) 8	BIIB IBII IBBI
12720 SPINNAKER LANE 12720 SPINNAKER											
WELLINGTON US	I FL 33414		WELLINGTON FL 33414 US				DO NOT WRITE	INI THIS	CDACE		
] 55								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
								12/14/1992			
2. Principal P	lace of Busin	ness		2a. Mailing Address				4. FEI Number		A	pplied For
Suite Act # etc				Cuito And Horizon				65-0396577			lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & State				City & State				6. Election Campaign Financing			lequired
23				28				Trust Fund Contribution			May Be to Fees
Zip	¬			Zip Country			,	8. This corporation owes or has paid the current year Intangible			
24 25			29	<u> </u>			Personal Property Tax due June 30. Yes No				
9, Name and Address of Current Registered Agent							10. Name and Address of New Registered Ager			Agent	
CELONA, JOHN 12720 SPINNAKER LANE						81	Name				
	ZU SPINN. ELLINGTON						Street Addre	ess (P.O. Box Number is Not Acceptable	e)		
***	CLINGTON	rr 33003				83					
						84	City		FL	85 Zip	Code
11. Pursuant	to the provis	ions of Sections 607	.0502 and 6	07.1508, Florida S	Statutes, the i	above	-named corpo	oration submits this statement for the puon's board of directors. I hereby accept		t changing i	ts registered
agent. La	egistered ag m familiar wi	jent, or both, in the S ith, and accept the c	state of Flori bligations of	da. Such change f, Section 607.05(was authorizi 05, Florida Sta	ed by atutes	the corporations.	on's board of directors. I hereby accept	the app	iointment as	registered
SIGNATURE	_										
Signature: typed or printed name of registered agent and title if applicable. (NOTE 12. OFFICERS AND DIRECTORS							nt signature require	· · · · · · · · · · · · · · · · · · ·	DATE		
TITLE	D	OFFICERS	AND DIREC	DELET	13. £ 111	TITLE		ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR Change	RS IN 12 Addition
NAME	CELON	A, JOHN		<u> </u>		NAME				change	Auguston .
STREET ADDRESS 12720 SPINNAKER LANE				1.3 STREE			ADDRESS				
City-St-ZIP WELLINGTON FL							T-ZIP		15		
TITLE				☐ DELET		MILE				Change	Addition
NAME					2.21	MAME					+
STREET ADDRESS					2.3 5	STREET	ADDRESS				
CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·			CITY-S	T-ZIP				
TITLE				L DELET	E 3.11	TITLE				☐ Change	☐ Addition
NAME					3.21	NAME					
STREET ADDRESS							ADDRESS				
CITY - ST - ZIP TITLE				DELET		CITY-S	iT-ZIP			100000	
NAME				L Occess		ITLE				Change	Addition
STREET ADDRESS						NAME	***************************************				ŀ
CITY-SI-ZIP						CITY-S	ADDRESS				
TITLE				DELETE			1-24	,,		Change	Addition
NAME						IAME	İ				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						XTY-SI	i				
TITLE				☐ DELETE						Change	Addition
NAME					6.2 N	IAME					
STREET ADDRESS					6.3 \$	TREET	ADDRESS				
CITY - ST - ZIP					6.40	ITY-S	r- 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 roceiver 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.

SIGNATURE:

4/5/98