

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2004 8:00 am
Secretary of State

DOCUMENT # P93000023548

1. Entity Name

CARPET SALES & DISTRIBUTORS, INC.



01-28-2004 90007 009 ***150.00

Principal Place of Business

2101 W. ATLANTIC BLVD.
126
POMPANO BEACH FL 33069
US

Mailing Address

2101 W. ATLANTIC BLVD
126
POMPANO BEACH FL 33069
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0394888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZATKOWSKY, BRAIN
6018 NW 80TH TERRACE
POMPANO BEACH FL 33067

Name

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

City

Parkland

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME DOLIN, ALLAN R.
STREET ADDRESS 1800 S OCEAN BLVD, STE #907
CITY-ST-ZIP POMPAHO BEACH FL 33062

TITLE V ☐ Delete
NAME ZATKOWSKY, BRAIN
STREET ADDRESS 1588 N.W. 103RD TERRACE
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE SRT ☐ Delete
NAME DOLIN, LINDA J
STREET ADDRESS 1800 S OCEAN BLVD STE 907
CITY-ST-ZIP POMPAHO BEACH FL 33062

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Brian Zatkowsky
STREET ADDRESS 6018 N.W. 80th Terrace
CITY-ST-ZIP Parkland, FL 33067

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

ALLAN R. DOLIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PRES

Date

1-22-04 954-969-0000

Daytime Phone #