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

PROFIT CORPORATION ANNUAL REPORT

1997

CLEARWATER FL 34625

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000026833 (2)

CELEBRITY CARPET CARE, INC.

Principal Place of Business	Mailir
406 ANNA AVE.	406 A

Mailing Address

408 ANNA AVE. CLEARWATER FL 34625-2707

FILED May 14 1997 8:00am Secretary of State

3a. Date of Last Report

3. Date incorporated or Qualified

TOHN SOT HALLER 4/29/97 8/3 7254667

								04/12/1993 05/			01/1996			
2.	Principal P	lace of Busines		2a. Mailir	ng Address	/			4. FEI Number	***************************************		Ap	plied For	
21	40	7				ME		······································	59-3175906			No	t Applicable	
22	Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certificate of Status	Desired		\$8.75 / Fee Re			
	City & State	Arwater) F1.	<u>}</u>	City & State				6. Election Campaign	_	П	\$5.00	•	
23	Zip	AKWAIE.	Country	28 Zip		Count	irv		Trust Fund Contribu			Added 1		
24	346	a 5	ممالمشاها	29		30	,, y		This corporation hat Florida Statutes		Yes [199.032,	
9 Name and Address of Current Registered Agent						1901			10. Name and Addres					
HALLER, JOHN S							81 Name							
408 ANNA AVE. CLEARWATER FL 34825						_								
						\ e	82 Street Address (P.O. Box Number is Not Acceptable)							
	ULL	ARMAILE I L	37023			8	83							
						Ĺ								
							84 City FL 85 Zip Code							
11	Pursuant	to the provision	s of Sections 607.05	02 and 607.150	08, Florida Statut	es, the abo	ove-	named corpo	pration submits this statem on's board of directors. I	nent for the pu	rpose of	changing it	s registered	
	agent. La	am familiar with,	and accept the obli	gations of, Sect	ion 607.0505, Fl	orida Statut	tes.	ine corporatio	on a board of directors. Th	neleby accep	uio appa	MINITION CO	registered	
SI	GNATURE	Stepahire typed or r	c because of care haloud	gent and title it applie	able (NO)	F: Registered I	aneni Aneni	t singal ret tenvire	d when reinstairing!		DATE			
12	 !.	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered SOFFICERS AND DIRECTORS 13.					· · ·	oligination rottomer	ADDITIONS/CHANG	ES TO OFFICE		DIRECTOR	S IN 12	
111		PD			DELETE	1.1 TITLE	E	V	/			Change	X Addition	
HA		HALLER, JO)HN S			1.2 NAM	(E	· ·	rederick i	N. Sm	HT			
	REFLADORESS	406 ANNA				1.3 STRE		, ,		REEK D				
	Y - \$1 - 7(P	CLEARWAT				1.4 CITY		} " "		Nas F		4689		
TIT					DELETE	2.1 TITL			7.3884 N. 1911	7 / 1	71	Change	Addition	
NA	Mi	1				22 NAM	IE	}					- "	
STE	REET ADDRESS			2.3 STRE	FFT A	DDRESS			. تغواه					
	Y - \$1 - ZIP	ĺ				2.4 CITY		1			1		İ	
til					DELETE	31 TITLI		<u> </u>				Change	Addition	
NA	ME !	4			32		Œ	}						
STE	REET ADDRESS			3.3 STRE	EET A	DORESS								
CH	Y - S1 - ZIP	1				3.4. CITY	v-ST	-71P					ł	
TIT		İ			DELETE	4.1 THILE					· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NA!	ME I	}				4. 2 NAM	Æ					~	1	
STE	REET ADDRESS	ļ				4.3 STRE		DDRESS						
CII	Y-S1 ZIP	}				4.4 CITY							 	
TIT				<u></u>	DELETE	5.1 TITLE						Change	☐ Addition	
NA	Mf:	}				52 NAM	IE.	{				_	1	
STE	HEET ADDRESS					5.3 STRE		DORESS						
	Y - \$1 - ZIP	1				5.4 City								
ŢĮŢ		İ		***************************************	DELETE	6.1 THILI						Change	Addition	
NA	ME	}				6.2 NAM	IE ··					-	}	
	REET ADDRESS	<u> </u>				6.3 STRE		DDRESS						
	r-S1-ZiP	ļ				6.4 CITY		·					ļ	
		by certify that if	ne information suppl	ed with this filin	g does not quali				in Section 119.07(3)(i), Fi	orida Statutes	. I further	certify that	the	
Į	Information	on indicated on officer or directo	this annual report of ir of the corporation	supplemental a	annual report is t or trustee empor	rue and ac	ecur:	ate and that r	my signature shall have the as required by Chapter 4	he same legal 307. Florida St	effect as	if made und d that my r	der oath; that	
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 cath; 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.														