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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000056607 (3)

BENNINGTON CARPET & TILE, INC.

FILED Jan 26 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/12/1993 Applied For Not Applicable 65-0436463 \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. □ No 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 COOPER, GARY 100 W CYPRESS CREEK RD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 930 83 FT LAUDERDALE FL 33309 84 City 85 Zip Code F٤ 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. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent a gnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1 1 TITLE Change Addition TITLE NAME COOPER, GARY 1.2 NAME STREET ADDRESS 100 W CYPRESS CREEK RD #930 TRADE CTR S 1.3 STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33309 1.4 CITY - ST - ZiP TITLE DELETE ☐ Change Addition 2.1 THILE CHAMBERS, ALBERT E 1100 SW CONGRESS AVE #4 STREET ADDRESS 2.3 STREET ADDRESS DELRAY BCH FL 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TILLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-\$T-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change TITLE 51 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 61 TITLE ☐ Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 repeiter or true to empowered to execute this report as required by Chapter 607, Florida Statutes; and the my name appears in Block 13 if changed, or on an attroprent subject. Block 12 or Block 13 if changed, or on a