SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE. CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P93000059884 (5) **DOCUMENT #** THE COLLECTION CARPET #1, INC. Mailing Address Principal Place of Business 13398 SW 11TH LANE 13398 S.W. 11TH LANE MIAMI FL 33084 MIAMI FL 33184 3a. Date of Last Report 3. Date Incorporated or Qualified 08/26/1993 08/14/1995 Applied For 2a. Mailing Address 4 FEI Number 2. Principal Place of Business Not Applicable 65-0444450 26 21 \$8.75 Additional Suite, Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032 Country Zio Ζιρ Yes No Florida Statutes 30 29 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent RENDON, GUILLERMO 13398 S.W. 11TH LANE **MIAMI FL 33184** 84 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. Thereby accept the appointment as registered agent. Lam familiar with and accept the obligations of Section 607.0505, Florida Statutes. NHO Lend of registered agent and title if applicable Goellenno endon SIGNATURE (NOTE: Registered Agent's gharure required when reinstating) (96/E)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 11 TITLE TITLE CR2E034 1.2 NAME RENDON, GUILLERMO NAME 13398 S.W. 11TH LANE 13 STREET ADORESS STREET ADDRESS MIAMI FL 33184 14 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 THILE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY ST-ZIP CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ACORESS STREET ADDRESS 34 CITY - ST - Z:P CITY-ST-ZIP Change Addition DELETE 4.1 THILE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5.1 DILE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 62 NAME 6.3 STREET ADORESS STREET ADDRESS 64 CiTY - ST- ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address CITY-ST-ZIP 6-6-96 Bayens Prome 8