


2004 FOR PROFIT CORPORATION ANNUAL REPORT

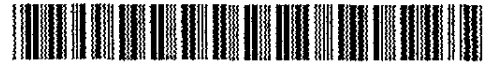
FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000003450
 1. Entity Name
 CARPETVIEW OF JACKSONVILLE, INC.



Principal Place of Business Mailing Address
 6539-1 POWERS AVE. P O BOX 56622
 JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32241

DO NOT WRITE IN THIS SPACE



02112004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 59-3222454 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 COLLEY, MATTHEW B
 6539-1 POWERS AVE.
 JACKSONVILLE, FL 32217

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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: *Matthew B. Colley* DATE: *3-4-2004*

FILE NOW!!! FEE is \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

03/31/04-80036-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	D COLLEY, MATTHEW B 10732 CROSSTIE RD W JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY ST ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Matthew B. Colley* DATE: *3-4-2004* 904-262-7355