

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

FILED  
May 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000004412 (0)

1. Corporation Name  
CARPETS, INC.

Principal Place of Business  
6046 JET PORT INDUSTRIAL BLVD.  
TAMPA FL 33634

Mailing Address  
6060 JET PORT INDUSTRIAL BLVD  
TAMPA FL 33634  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 6022 Benjamin Rd.  
Suite, Apt. #, etc.  
22  
City & State  
23 Tampa, FL  
Zip  
24 33634  
Country  
25 USA

2a. Mailing Address  
26 6022 Benjamin Rd.  
Suite, Apt. #, etc.  
27  
City & State  
28 Tampa, FL  
Zip  
29 33634  
Country  
30 USA

3. Date Incorporated or Qualified  
01/10/1994

4. FEI Number  
59-3221495  
Applied For  
Not Applicable

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

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

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

J. STANFORD LIFSEY P.A.  
120 HYDE PARK PLACE  
SUITE 120  
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name  
J. Stanford Lifsey, P.A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
324 South Hyde Park Ave  
83 Suite 375  
84 City  
Tampa FL 85 Zip Code  
33606

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 title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	MARTIN, REGINALD	198 BLANCA	TAMPA FL 33606	<input type="checkbox"/>
V	LIFSEY, J. STANFORD	120 HYDE PARK PLACE, SUITE 120	TAMPA FL 33606	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1	2.2	2.3	2.4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1	3.2	3.3	3.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1	4.2	4.3	4.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1	5.2	5.3	5.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1	6.2	6.3	6.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. 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 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 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.

SIGNATURE

5/1/98

CR2E034 (10/97)