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

**CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000013096 (0)

CARPET FAIR, INC.

## **FILED** Apr 21 1998 8:00am Secretary of State



	<u> </u>					
Principal Place of Business Mailing Address					L 100 EIORI 410 ADAIN RIDIO BRAIL BRAIL BRAIL BRAIR 11 FROM 41511 BRAILD EBGIR DESC ADRIL	
2831 N. FEDERAL HIGHWAY 2831 N. FEDERAL HIGH BOCA RATON FL 33431 BOCA RATON FL 33431						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
	_					02/14/1994
2. Principal F	Place of Business	2a. Mailing Address	. Mailing Address			4. FEI Number Applied For
21		26				65-0472473 Not Applicable
Suite, Apt.	#, <b>e1</b> c.	Suite, Apt. #, etc.				5 Certificate of Status Desired S8.75 Additional
City & Stat	<u> </u>	City & State				Fee Required
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip				8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30.  Yes No
	ent Registered Agent			r	10. Name and Address of New Registered Agent	
DA	SZKAL BOLTON & MANELA			81	Name	
	D <mark>west Palmetto Park Ro</mark> a	,D		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
	ITE 300			83		<u> </u>
BO	CA RATON FL 33432			63		
				84	City	EL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	atutes, the al	DOVE	e-named co	ornoration submite this statement for the nursees of changing its societared
agent. La	egistered agent, or both. In the Stat m f <mark>amili</mark> ar with, and accept the obli	le of Honda. Such change wa gations <mark>of, S</mark> ection 607.0505.	as authorized Florida Stat	d by tutes	the corpo i.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	<del></del>					
Signature, byted or printed name of registered agent and tile it applicable (NOTE  12. OF FICERS AND DIRECTORS				d Age	nt signature rei	quired when reinstating) DATE
TITLE	P	DELETE	13.	It F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	ELIOVITZ, BARRY	<del></del>		1.2 NAME		El Charge El Manifoli
STREET ADDRESS	19728 CAROLINA CIRCLE				ADDRESS	
CITY-S1-ZIP	BOCA RATON FL 33434		1.4 00	1.4 CITY-ST		
TITLE		☐ DELETE	2.1 117			Change Addition
NAME			2.2 NA	MĚ		
STREET ADDRESS	2.3		2.3 \$1	REET :	ADDRESS	
CITY-ST-ZIP		2.4   OTLETE 31		IIY-S	T-ZIP	
TATLE	<b> </b>		3.1 TI1	3.1 TITLE		Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 \$11	REET	ADDRESS :	
CITY-ST-ZIP				3.4. CITY-ST-ZIP		
TITLE		L DELETE	4 1 117	4 1 117 ( F		☐ Change ☐ Addition
NAME			4. 2 NA	AME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CII		- 7IP	
NAME		LJ Utitit	5.1 1(1			L Change L Addition
			5.2 NAI			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE				54 CHY-SI-ZIP 51 THLE		Change Addition
NAME		L_I WILLIE	6.2 NAI			LI Change LI Adoliton
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP						
	erlify that the information consider to	with this blust deep not smalls	6.4 CI1	Y - S1	- /IP	in Continu 110 07/07/0 Florida District Library

r mereby 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.

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