

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000015218

FILED  
Feb 09, 2005  
Secretary of State

Entity Name: A.B.C. CARPET CARE SYSTEMS, INC.

## Current Principal Place of Business:

2805 CASE AVE  
BRADENTON, FL 34207 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 14241  
BRADENTON, FL 34280 US

## New Mailing Address:

FEI Number: 65-0472375

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SELMAN, E. BRUCE III  
2805 CASE AVENUE  
BRADENTON, FL 34207 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SELMAN, E.BRUCE III  
Address: 2805 CASE AVE.  
City-St-Zip: BRADENTON, FL 34205

Title: ST ( ) Delete  
Name: SELMAN, LOURDES D  
Address: 2805 CASE AVE  
City-St-Zip: BRADENTON, FL 34207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. BRUCE SELMAN III

PD

02/09/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date