


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90964 027 ***150.00

DOCUMENT # P94000046570	
1. Entity Name PROFESSIONAL CARPET SYSTEMS OF PALM BEACH COUNTY, INC.	

Principal Place of Business 9393 CASCADE COURT BOYNTON BEACH FL 33437	Mailing Address 9393 CASCADE COURT BOYNTON BEACH FL 33437
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2. Principal Place of Business 4844 Cypress Drive South	3. Mailing Address 4844 Cypress Drive South
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Boynton Beach, FL	City & State Boynton Beach, FL
Zip 33436	Zip 33436
Country USA	Country USA

4. FEI Number 65-0493914	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HART, KENNETH J 9393 CASCADE COURT BOYNTON BEACH FL 33437	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4844 Cypress Drive South City Boynton Beach FL Zip Code 33436
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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  **DATE** 2/28/03

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	NAME HART, KENNETH J	TITLE 4844 Cypress Drive South	NAME Boynton Beach, FL. 33436
STREET ADDRESS 9393 CASCADE COURT	CITY-ST-ZIP BOYNTON BEACH FL 33437	STREET ADDRESS Boynton Beach, FL. 33436	CITY-ST-ZIP Boynton Beach, FL. 33436
TITLE S	NAME HART, CHRISTINE A	TITLE 4844 Cypress Drive South	NAME Boynton Beach, FL. 33436
STREET ADDRESS 9393 CASCADE COURT	CITY-ST-ZIP BOYNTON BEACH FL 33437	STREET ADDRESS Boynton Beach, FL. 33436	CITY-ST-ZIP Boynton Beach, FL. 33436
TITLE 	NAME 	TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP 	STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME 	TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP 	STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME 	TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP 	STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME 	TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP 	STREET ADDRESS 	CITY-ST-ZIP

12. 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 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:  **DATE** 2/28/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)