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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400060617 (5)

FORD CARPET SERVICE, INC.

FILED
Jun 11 1997 8:00am
Secretary of State



Principal Plac	ce of Business	Mailing Add	ailing Address			1981/681 14 1611 9191 8511 8011 9011	40 4 0 84 44 88	110 # 101	
715 WESTWO			715 WESTWOOD LN						
BRANDON FL	33511	BRANDON F	L 33511-5821						
						3. Date Incorporated or Qualified	3a. Date	of Last B	teport
		4				08/15/1994		1/1996	Броп
2. Principal Place of Business 2a.			Mailing Address			4. FEI Number	1		oplied For
21	·	26				59-3271220			ot Applicable
Sulte, Apt.	#, etc.	Suite, Ar	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27				6. Certificate of Status Destreu		Fee Re	equired
City & Star	te `	City & St	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zφ	ļ	Country	•	8. This corporation has liability for it			. 199.032,
24	[25]	[29]	30	0]			Yes 🗌		
	9, Name and Address of Curre	ent Registered Age	nt	81	Name	10. Name and Address of New Re	gistered Ag	ent	
	RD, JUDITH			81	Name				
	WESTWOOD LN			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
BR	ANDON FL 33511						* #**		
				83					
	-			84	City			85 Zip	Code
	•							·	
11. Pursuant office or	to the provisions of Sections 607.05 registered agent, or both, in the Stat	602 and 607.1508, F se of Fforida. Such c	florida Statules, change was auti	the above horized by	e-named cor the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of cl it the appoir	nanging it siment as	s registered registered
agent. I a	am familiar with, and accept the obli	gations of, Section	607.0505, Floric	ia Statutes	3,		· · · · · · · · · · · · · · · · · · ·		. og.o.co
SIGNATURE							·		
12.	Signature, typed or printed name of registered a	ND DIRECTORS	(NOTE: R	13.	int signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DE AND D	IDECTOR	C IN 10
TOTLE	P		DELETE	1.1 TITLE	··· · · · · · · · · · · · · · · · · ·	ABBITIONS/OFFANGES TO OFFICE		Change	Addition
NAME	FORD, ROBERT F	_		1.2 NAME	•		lean.	_ onango	
STREET ADDRESS	715 WESTWOOD LN			1.3 STREET	Anneres				
CITY-ST-ZIP	BRANDON FL 33511			1.4 CITY-S					
TITLE	V		DELETE	2.1 TITLE	1-214		Т	Change	Addition
NAME	FORD, ROBERT J	<u>-</u>		2.2 NAME			·		
STREET ADDRESS	715 WESTWOOD LN			2.3 STREET	ADDRESS				
CITY-ST-ZIP	BRANDON FL 33511			2. 4 CITY-S					
TITLE	T		DELETE	3.1 TITLE	11.511		Т	Change	Addition
NAME	FORD, JUDITH	_		3.2 NAME			_		
STREET ADDRESS	715 WESTWOOD LN			3.3 STREET	ADDRESS		,		
CITY-ST-ZIP	BRANDON FL 33511			3.4. CITY - S					}
TITLE	8		DELETE	4.1 TITLE				Change	Addition
NAME .	FORD, KIMBERLY K			4. 2 NAME			-	-	
STREET ADDRESS	410 CLARISSA DR			4.3 STREET	ADDRESS				
CITY-ST-ZIP	BRANDON FL 33511			4.4 CITY-S	1				
TITLE			DELETE	5.1 TITLE	-	,		Change	Addition
NAME	. 37			5.2 NAME				-	
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CHTY - ST					,
TITLE			DELETE	61 TITLE	-			Change	Addition
NAME				62 NAME				-	į
STREET ADDRESS 1	And The Control of		l	63 STREET	ADDRESS				
CITY-ST-ZIP	The fall opening			6 4 CITY - ST					

I do 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.