## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** Corporation Name

P94000091267 (2)

ABBEY COMMERCIAL CARPET CORP. Mailing Address Principal Place of Business 13120 66TH STREET NORTH 13120 66TH STREET NORTH LARGO FL 34643 **LARGO FL 34643** 3a. Date of Last Report 3. Date Incorporated or Qualified 12/16/1994 05/01/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-3312276 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s 199.032, Country Zip Zip Country Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DAFONTE, RICHARD J ESQ 82 Street Address (P.O. Box Number is Not Acceptable) 1000 BELCHER ROAD SOUTH SUITE 2 83 **LARGO FL 34641** City Zip Code 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition Change DELETE ħ E034 KATNY, LISA 1.2 NAME NAME 13120 66TH STREET NORTH 1.3 STREET ADDRESS STREET ADDRESS **LARGO FL 34643** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Add-tion DELETE 2 1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY - ST - ZIP ☐ Addition DELETE 3.1 TITLE TITUE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-S1-ZIP Change Addition DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREE1 ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP City-St-ZiP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6 1 TITLE TITLE 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K). 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

SIGNATURE:

CITY-ST-ZIP