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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1	1996		DIVI	SION OF CORF	PORATIO						
	OCUN Corporation	Name		000041449	9 (6)							
	KIDDIE	CARPET	r, inc.					L 18 DE A DE 110 10 10 10 10 10 10 10 10 10 10 10 10	 		1:1:	
Pr	incipal Place	of Business		Mailing Addres	s							
7761 S.W. 88TH ST.			7761 S.W. 88	RTH ST.								
#D101			#D101	#D101								
	MIAMI FL 331	56		MIAMI FL 33	156			3. Date Incorporated or Qualifie	i 3a. Date	of Last Re	port	
2.	Principal Pla	ce of Busin	ess	2a. Mailing Add	lress			05/25/1995 4. FEI Number			Applied For	
21	an a reag			26	<u></u>			65.058345	7		Not Applicable	
Suite, Apt. #, etc.			<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required		
22	City & State			City & State	City & State			6. Election Campaign Financing			May Be	
23				28				Trust Fund Contribution	1 1 7			
	Zip	Zip Country Zip		Zip	├ ¬				8. This corporation has liability for intangible tax under s. 199.032,			
24		25 29 9. Name and Address of Current Reg		29				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
-		9. Name	and Address of Co	urrem negistered Agen	<u></u>	81	Name	To. Name and Addiess of the	, negioloio			
	BUILD	EDEMV				82	Street	Address (P.O. Box Number is Not Accep	table)			
BOUIS, JEREMY 7761 S.W. 88TH ST.							Otroot					
#D101						83						
MIAMI FL 33156						84	84 City FL 85 Zip Co				Code	
	familiar witl IGNATURE	h, and acce	pt the obligations of,	Section 607.0505, Florida	a Statutes.			orporation submits this statement for the board of directors. I hereby accept the a	purpose of chi ppointment as	anging its re registered	egistered office agent. I am	
1:		Signature, typed	or printed name of registers OFFICER	S AND DIRECTORS	(NOTE REG	13.	it signarare:	ADDITIONS/CHANGES TO C		DIRECTO		
	TLE	D		□ DI	TETE	1. 1 TITLE		PRESSDENT	[Change	Addition	
N/	BOUIS, JEREMY						RACHEL DAUSLA BOWTS					
1	REET ADDRESS		.W. 88TH ST. #D	101				77615,W.8850 # PIOL				
-	TY+ST-ZIP TLE	MIAML	FL 33156		LETE	14 CHY-5	51 - ZIP	MANNA , FL. 33156] Change	Add tion	
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1	ree1 address					2 3 STREET	I ADDRESS					
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	TREET ADDRESS					3.4 CITY - S						
$\overline{}$	TLE			<u> </u>	ELETE	4.1 TITLE	<u> </u>			Change	Addition	
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s	IREET ADDRESS					4 3 STHEE	F ADDRESS					
-	ITY-S1-ZIP				TI FTC	4.4 CITY - 3				Change	Add tion	
1	1LE				ELEIE	5 1 TITLE 5 2 NAME				- o-lange	LI MOUNT	
1	AME TOCCI ADDDESS						T ADDRESS					
1	TREET ADDRESS					5.4 CHY-1						
—	TLF				ELETE	6 1 TITLE				☐ Change	Addition	
1	AME					6 2 NAME						

6.4 CHY-ST-ZIP 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 five and accurate and that my signature shall have the same legal effect as if made under early, 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.

6.3 STREET ADDRESS.

SIGNATURE:

STREET ADDRESS

NAME OF SIGNING OFFICER OR DIRECTOR

3/18/76 (305) 595-6128

CR2E034 (12/95)