

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000054739**

Corporation Name

CERTIFIED CARPET SALES AND SERVICE, INC.

Principal Place of Business

**280 N.E. JENSEN BEACH BLVD
JENSEN BEACH FL 34957**

Mailing Address

**1280 N.E. JENSEN BEACH BLVD
JENSEN BEACH FL 34957**

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90032 016 ***550.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
Suite, Apt. #, etc.		26		07/11/1995	
City & State		27		4. FEI Number	
Zip		28		59-3357165	
Country		29		Applied For	
25		30		Not Applicable	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		5. Certificate of Status Desired	
MAY, KATHI		81 Name		8.75 Additional Fee Required	
2080 N.E. JENSEN BEACH BLVD		82 Street Address (P.O. Box Number is Not Acceptable)		6. Election Campaign Financing	
JENSEN BEACH FL 34957		83		Trust Fund Contribution	
		84 City		8. This corporation owes the current year	
		FL		Intangible Personal Property.	
		85 Zip Code		Yes No	

I. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	PS	1.1 TITLE	Change Addition
ME	MAY, KATHI	1.2 NAME	
REET ADDRESS	1280 N.E. JENSEN BEACH BLVD	1.3 STREET ADDRESS	
Y-ST-ZIP	JENSEN BEACH FL 34957	1.4 CITY-ST-ZIP	
LE	VPT	2.1 TITLE	Change Addition
ME	MAY, PHIL	2.2 NAME	
REET ADDRESS	1280 N.E. JENSEN BEACH BLVD	2.3 STREET ADDRESS	
Y-ST-ZIP	JENSEN BEACH FL 34957	2.4 CITY-ST-ZIP	
LE		3.1 TITLE	Change Addition
ME		3.2 NAME	
REET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
LE		4.1 TITLE	Change Addition
ME		4.2 NAME	
REET ADDRESS		4.3 STREET ADDRESS	
Y-ST-ZIP		4.4 CITY-ST-ZIP	
LE		5.1 TITLE	Change Addition
ME		5.2 NAME	
REET ADDRESS		5.3 STREET ADDRESS	
Y-ST-ZIP		5.4 CITY-ST-ZIP	
LE		6.1 TITLE	Change Addition
ME		6.2 NAME	
REET ADDRESS		6.3 STREET ADDRESS	
Y-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE:

Kathi May Kathi May

7/30/99

561-334-4156

CR2E034 (5/99)