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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000064035

PERDOMO'S CARPET INC

Principal Place of Busines	SS
0000 MM 77 AVE	

## FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90010 005 \*\*\*150.00



	<u> </u>					J
Principal Place of Business Mailing Address						
9820 NW 77 AVE 9820 NW 77 AVE						
HIALEAH GARDENS FL 33016		HIALEAH GARDENS FL 33016			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed		
					08/18/1995	-
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
2. 1 1110   211	OCCUPATIONS OF THE PROPERTY OF	26	-		65-0605261 Not Applicable	Э
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional	7
	,, 0.0.	27			5. Certificate of Status Desired Fee Required	
27     27				6. Election Campaign Financing 55.00 May Be	_	
23		28			Trust Fund Contribution Added to Fees	}
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intangible	7
24	25	29 30	ī.		Personal Property Tax. ☐ Yes ☐ No	
24	9. Name and Address of Currer		1		10. Name and Address of New Registered Agent	
			81	Name		l
PERI	DOMO, FRANCISCO JOSE		00	Carrent Addr	ress (P.O. Box Number is Not Acceptable)	
1642	24 STONE HAVEN RD		82	Street Addr	ress (P.O. box number is not acceptable)	}
MIAM	MI LAKES FL 33014		83			7
						_
			84	1 1	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abov	e-named corp	poration submits this statement for the purpose of changing its registered	- (
office or r	egistered agent, or both, in the State im/familiar with; and accept the obliga	of Florida, Such change was auth itions of 25ction 607.0505, Florida	orized by a Statutes	tne corporations.	on's board of directors. I hereby accept the appointment as registered	1
	12/ - 1	V . 1			419189	-
SIGNATURE	Signature, typed or printed name of registered age		gistered Age	nt signature require	od when reinstating) . DATE	6
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-  ₹
TITLE	D	☐ DELETE	1.1 TITLE	Ì	☐ Change ☐ Additi	3n   3
NAME	PERDOMO, FRANCISCO JOSE	JOSE 12 N				3
STREET ADDRESS	16424 STONE HAVEN RD	1.3 \$		TADDRESS		]
CITY-ST-ZIP	MIAMI LAKES FL 33014		1.4 CITY- S	ST-ZIP		_  }
TITLE	-	☐ DELETE	2.1 TITLE		☐ Change ☐ Additi	on   Y
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	TADORESS		ļ
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addit	on
NAME	1		3.2 NAME			1
STREET ADDRESS		•	3.3 STREE	T ADDRESS		
CITY-ST-ZIP	·		3.4. CITY-	1		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Additi	ол
NAME .		_	4, 2 NAME			- {
₩.			4.3 STREET ADDRESS			1
STREET ADDRESS	1					
CITY-ST-ZIP		- OELETE -	4.4 CITY-5	21.7TL	☐ Change ☐ Addit	on-
	' '	<u>_</u>	5.1 NAME		_ , _	
NAME			5.3 STREET ADDRES			
STREET ADDRESS	1		5.4 CITY-S			
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addit	ion
TITLE		DELETE	6.2 NAME			
NAME	<b>}</b>			T ADDRESS		- [ .
STREET ADDRESS						
	1		64 CITY-5	SIA/IP I		- 1

14. 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 manged, or on an attachment with an address with all other like empowered.

SIGNATURE