## 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 # P95000070112

1. Corporation Name

MANDARIN CARPETS, INC.

Principal	Place	of	Business

Mailing Address

11467 SAN JOSE BLVD.

11467 SAN JOSE BLVD.

## FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90085 050 \*\*\*150.00



JACKSONVILLE FL 32223		JACKSONVILLE FL 32223			DO NOT WRITE IN THIS SPACE			
			_		3, Date Incorporated or Qualifed 09/12/1995			
2. Principal P	Place of Business 2a. Mailing Address			4. FEI Number	Applied For			
21	26				59-3333012	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Le Cortifonto of Status Decired	.75 Additional ee Required		
City & Stat	е	City & State			1	5.00 May Be dded to Fees		
Zip 24	Country 25	Zip 30	Country	у	8. This corporation owes the current year Intangible Personal Property Tax.			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent			
			81	Name	<del></del>			
	DAN, TERRELL L		-	Street Add	troop (B.O. Box Number is Not Acceptable)	<del></del>		
11467 SAN JOSE BLVD.			82	82 Street Address (P.O. Box Number is Not Acceptable)				
JACH	(SONVILLE FL 32223		83	3				
			-	City	los	Zip Code		
			84	City	FL  85	ZID COUR		
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	it Florida. Such change was autho	onzea by	y tne corporati	poration submits this statement for the purpose of chang ion's board of directors. I hereby accept the appointmen	t as registered		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	gistered Age	ent signature requin	ed when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 12		
TITLE	PS	☐ DELETE	1.1 TITLE			hange   Addition		
NAME	JORDAN, ANGELA L.		1.2 NAME					
STREET ADDRESS	1856 EAST ROAD		1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-5	ST-ZIP				
TITLE	VI	☐ DELETE	2.1 TITLE			hange 🔲 Addition		
NAME			2.2 NAME	2 NAME				
STREET ADDRESS	1856 EAST ROAD			ET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-:	l.				
TITLE		☐ DELETE	3.1 TITLE			hange		
NAME			3.2 NAME	Ì				
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	1				
TITLE		☐ DELETE	4.1 TITLE			nange		
NAME			4. 2 NAME	:				
STREET ADDRESS			4.3 STREE	ET ADDRESS				
CITY-ST-ZIP	•		4.4 CITY-S					
TITLE		☐ DELETE	5.1 TITLE			nange Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP				
TITLE	<del>-</del>	☐ DELETE	6.1 TITLE			nange Addition		
NAME			6.2 NAME	}				
STREET ADDRESS			6.3 STREE	T ADDRESS				
STREET ADDRESS			6.4 CITY- S					

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

TERRELL L. JORDAN

(904) 268-2996