

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. McElham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000074713 (5)

1. Corporation Name

CARPET SYSTEMS OF LARGO, INC.



Principal Place of Business

1440 MISSOURI AVE., NORTH  
LARGO FL 34640

Mailing Address

1440 MISSOURI AVE., NORTH  
LARGO FL 34640

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

THOMAS, KIM M  
5198 LAKE VALENCIA BLVD. EAST  
PALM HARBOR FL 34684

3. Date Incorporated or Qualified

09/27/1995

3a. Date of Last Report

4. FEI Number

59-3340881

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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

Signature to be printed in Block 12 or Block 13

Signature to be printed in Block 12 or Block 13

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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13.

1. TITLE

2. NAME

3. STREET ADDRESS

CITY-STATE-ZIP

4. TITLE

5. NAME

6. STREET ADDRESS

CITY-STATE-ZIP

7. TITLE

8. NAME

9. STREET ADDRESS

CITY-STATE-ZIP

10. TITLE

11. NAME

12. STREET ADDRESS

CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

CITY-STATE-ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

CITY-STATE-ZIP

☐ Change ☐ Addition

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-05/14/96--01009-006  
\*\*\*200.00

APR 15 1996

SIGNATURE: Kim M. Thomas President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 5, 1996 813581-2000

CR2E034 (12/95)