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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500083050 (1)

CARPET & DRAPERY LAND, INC.

## **FILED** Feb 11 1998 8:00am Secretary of State



Principal Place of Business  9506 SOUTH RED ROAD MIAMI FL 33156  2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23	Mailing Address 9506 SOUTH RED ROAI MIAMI FL 33156  28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28		DO NOT WRITE IN T  3. Date Incorporated or Qualified 10/30/1995  4. FEI Number 65-0624609  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Requires \$5.00 May P
Zip Country 25	Ζφ <b>29</b>	Country 30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	☐ Yes
9. Name and Address of Co	ırrent Registered Agent		10. Name and Address of New Registe	red Agent
COUREL, ALVARO 9508 SOUTH RED ROAD MIAMI FL 33156		<ul><li>81 Name</li><li>82 Street Add</li><li>83</li><li>84 City</li></ul>	ress (P.O. Box Number is Not Acceptable)	EL 85 Zip Code
agent. I am familiar with, and accept the of SIGNATURE Signature typed or presed name of repister	State of Florida, Such change was biligations of, Section 607,0505, F stagest and life if applicable (NO SAND DIRECTORS	authorized by the corporal	lion's board of directors. I hereby accept the	appointment as registered
TITLE D  NAME COUREL, ALVARO  STREET ADDRESS 9506 SOUTH RED ROAD  CITY-ST-ZIP MIAMI FL 33156	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ D£ LETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-7IP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	3 1 THLE 3 2 NAME 3 3 STREET ADDRESS 3.4. CHY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - 7/P		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	☐ DELFTE	5.1 TITLE 5.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	OCCUETE	61 TITLE 62 NAME 63 STAFET ADDRESS		Change Addition
11. I hereby certify that the information supply indicated on this annual report of supplying	d with this filing does not quality	6.4 CHY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information