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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

i. Corporatio	TON CARPET & TILE, INC		9		٠				
Principal Plac	e of Business	Mailing Add	roce					!	(1 0 1 11 010 15 11 160)
•		•				Ţ	ŧ		
5612 14TH STREET WEST BRADENTON FL 34207 5612 14TH STREET WEST BRADENTON FL 34207									
002777011	2 0 1207	Orm Deliver	12 01201				DO NOT WRITE	E IN THIS SPACE	
							3. Date Incorporated or Qualifed 01/01/1996	•	į
2. Principal F	Place of Business	2a. Mailing /	Address				4. FEI Number 17 (115)	•	Applied For
21		26					65-0704213		Not Applicable
Suite, Apt. #, etc.			pt. #, etc.				5. Certificate of Status Desired	1 1	5 Additional
22 27							1 122 11 151	Fee	Required
City & Sta	te	City & S	tate				6. Election Campaign Financing		0 May Be
23 Zin	Country	28		C-1			Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zip	_	Country			8. This corporation owes the currer	· <u>-</u> /	□No
24	9. Name and Address of Curre	29 29	ant 3	10			Personal Property Tax. 10. Name and Address of New Re	Yes Yes	No
	o. Hamo dija Madroda di Calife	in registered Age		81	Name		io. Hame and Address of New No.	gistorea Agent	
BAR	NES, FRED L								
5612 14TH STREET WEST BRADENTON FL 34207			82	Street /	Address	(P.O. Box Number is Not Acceptab	le)		
רווט	DENTON TE 34207			83			5;		
				84	City			FL 85 Z	ip Code
office or i	to the provisions of Sections 607.05 egistered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such o ations of, Section 6	change was auti 607.0505, Florid	horized by	the corpo	oration's	board of directors. I hereby accept	urpose of changing the appointment as	its registered registered
12.		ND DIRECTORS	,	13.			ADDITIONS/CHANGES TO OFFI		TORS IN 12
TITLE	P		DELETE	1.1 TITLE				☐ Chang	e
NAME	BARNES, FRED L			1.2 NAME	1				
STREET ADDRESS	5612 14TH STREET W			1.3 STREET	ADDRESS		FIG. 30f		
CITY-ST-ZIP	BRADENTON FL			1.4 CITY-S1	T- ŽIP				
TITLE			DELETE	2.1 TITLE			1 lz: 3	Chang	e Addition
NAME				2.2 NAME			÷ .		ŀ
STREET ADDRESS				2.3 STREET	ADDRESS				ļ
CITY-ST-ZIP				2. 4 CFTY-S	T-ZIP		4 6		ĺ
TITLE			DELETE	3.1 TITLE			-	☐ Chang	je 🗌 Addition
NAME				3.2 NAME	1		į ·		-
STREET ADDRESS				3.3 STREET	ADDRESS		1121,		
CITY-ST-ZIP				3.4. CITY-S	T-ZIP				
TITLE		[☐ DELETE	4.1 TITLE			H ₂ I	☐ Chang	e
NAME				4.2 NAME			;		
STREET ADDRESS				4.3 STREET	ADDRESS				i
CITY-ST-ZIP			_	4.4 CITY-ST	r-ZIP				
TITLE		ι	DELETE	5.1 TITLE				Chang	e Addition
NAME				5.2 NAME	ļ				-
STREET ADDRESS				5.3 STREET	i				
CITY-ST-ZIP			T. D. F.	5.4 CITY-ST	r- ZIP				
TITLE		L	_ DELETE	6.1 TITLE				· [Chang	e 🔲 Addition
NAME				6.2 NAME					

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

CITY-ST-ZIP

941-746 -5829 Daytime Phone #