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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # **P9600004708** (9)

MARK RUGS, INC.

FILED Feb 11 1997 8:00am Secretary of State

3. Date (coorporated or Qualified) 34. Date of Last Report 0/1/11/1986	Principal Place of 6716 SWAIN AVENU TAMPA FL 33625		Mailing Address 6718 SWAIN AVENUE TAMPA FL 33625-3982		(************************************)		Harris Co.
2. Principle Prince of Business 2. Mailing Address 3. Feb. Number 5. Suite. Apt. #, etc 28 5. Certificate of Status Desired 58.75 Additional 58.75 Ad			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				3a. Date	e of Last F	leport
State Stat		e of Business	⊢			4. FEI Number	:		
Columbia	Suite, Apt. #, e	etc	Suite: Apt. #, etc.					\$8.75	Additional
Zep Courley Zep 20 30	City & State		City & State			,		\$5.00	May Be
SULMAN, REBACCA 6716 SWAN AVENUE TAMPA FL 33625 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I related accept the objections of Sections 607,0002 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the statement for the purpose of changing its registered agent. I related the corporation's board of directors. I hereby accept the appointment as registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registered agent. I related to the purpose of changing its registere	Zip	├ ─-1	Zip		try	8. This corporation has liability fo	r intangible ta	ax under s	
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SUMAN AIR NATIONES TAMPA FL 33825 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 A City FL 85 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 95 Street Address (P.O. Box Number is Not Acceptable) 96 Street Address (P.O. Box Number is Not Acceptable) 97 Street Address (P.O. Box Number is Not Acceptable) 98 Street Address (P.O. Box Number is Not Acceptable) 98 Street Address (P.O. Box Number is Not Acceptable) 99 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Address (P.O. Box Number is Not Acceptable) 90 Street Ad			eur uedistelen Wählt		81 Name	IV. HAIRE AND ACCIDES OF NEW H	ofisiolati V	Agur.	
TAMPA FL 33625 83 84 City FL 85 Zip Code 11. Parsual to the provisions of Sections 627.0502 and 627.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0502 fend 667.1508, Florida Statutes. SIGNATURE 25						dress (P.O. Box Number is Not Accepta	able)	<u> </u>	····
P. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submiles this statement for the purpose of changing its registered agent. In the Statute of Indica Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I and familiar with, and accept the obligations of. Section 607 0505, Florida Statutes. SIGNATURE	TAMPA	FL 33625		L					
1. 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 agent. I am I familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGN_TURE					84 City			85 Zio	Code
office or repetitors agent, in the State of Florida, but he State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I hereby agent agent. I hereby accept the appointment as registered agent agent. I hereby accept the appointment as registered agent agent. I hereby accept the appointment as registered agent agent. I hereby accept the appointment as registered agent agent. I hereby accept the appointment agent									
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14. I do 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 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/15/57 (813) 236-7028 Daytine Phone #