2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007556

FILED Feb 04, 2006 Secretary of State

Entity Name: PAUL'S CARPET WORKROOM OF PALM BEACH COUNTY, INC.

Current P	rincipal Place	of Business:	New Princ	pal Place of Business:	
550-B NE POMPANO	27TH ST O BCH, FL 330	064 US			
Current M	lailing Addres	s:	New Mailir	ıg Address:	
	RTHEAST 27 S O BEACH, FL 3				
FEI Number	: 65-0638172	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of	Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and	Address of New Registe	red Agent:
	PAUL W 27TH STREET O BCH, FL 330				
	e named entity s e of Florida.	submits this statement for th	e purpose of changing it	s registered office or regis	tered agent, or both,
	e of Florida.	submits this statement for th	e purpose of changing it	s registered office of regist	tered agent, or both,
n the State	e of Florida. * RE:	ic Signature of Registered A		s registered office of regist	
n the State	e of Florida. RE: Electron				
in the State	e of Florida. RE: Electron	ic Signature of Registered A	Agent		e
n the State SIGNATUI Election Car OFFICER Fitle: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIRECT PTD () SIEGEL, PAUL	ic Signature of Registered A Trust Fund Contribution (). TORS: Delete AST 27 STREET	Agent	Date	RS AND DIRECTORS
in the State	e of Florida. RE: Electron mpaign Financing S AND DIREC PTD () SIEGEL, PAUL 550-B NORTHE, POMPANO BEA	ic Signature of Registered A Trust Fund Contribution (). TORS: Delete AST 27 STREET CH, FL 33064 Delete RUCE T	Agent ADDITION Title: Name: Address:	Date S/CHANGES TO OFFICE	RS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL W. SIEGEL MR. 02/04/2006