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Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000021453 (1)**

1. Corporation Name

T-T CARPETS AND TILES, INC.



Principal Place of Business

Mailing Address

**43 S. DESOTO AVE.
ARCADIA FL 33821**

**43 S. DESOTO AVE.
ARCADIA FL 34266-4433**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

03/06/1996

4. FEI Number

65-0553948

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

**ALMACK, PALINDA
14 N. DESOTO AVE.
ARCADIA FL 33821**

10. Name and Address of New Registered Agent

81 Name

TISHA Lloyd

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

43 S DESOTO AVE

83

84

ARCADIA

FL

85 Zip Code

34266

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

TISHA LLOYD

Signature, typed or printed name of registered agent and title, if applicable

Tisha Lloyd

(NOTE: Registered Agent signature required when reinstating)

2/7/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PRESIDENT**
STREET ADDRESS **TIMOTHY LEE LLOYD**
CITY-ST-ZIP **1566 SE Highway 31**
ARCADIA FL 34266

TITLE ☐ DELETE
NAME **SEC/TRES**
STREET ADDRESS **TISHA NOEL LLOYD**
CITY-ST-ZIP **1566 SE Highway 31**
ARCADIA FL 34266

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Tisha Lloyd

2/7/97 494-9131

CR2E034 (9/96)