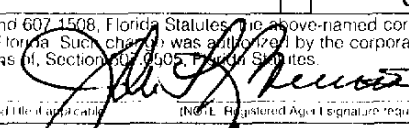
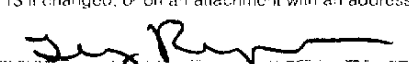


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jul 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000022269 1. Corporation Name The Carpet Magician, Inc.			
Principal Place of Business 1202 West Central Blvd. Orlando, Florida 32805		Mailing Address	
2. Principal Place of Business 21 2313 Silver Star Road Suite, Apt. #, etc. 22 City & State 23 Orlando, Florida Zip 24 32804		2a. Mailing Address 26 2313 Silver Star Road Suite, Apt. #, etc. 27 City & State 28 Orlando, Florida Zip 29 32804 Country 30 USA	
3. Date Incorporated or Qualified 3/12/96		3a. Date of Last Report N/A	
4. FEI Number 59-3350672		Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent Paulette Smith 105 15th Ave. Ocoee, Florida 34761		10. Name and Address of New Registered Agent 81 Name John L. Brewerton, III, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 250 North Orange Avenue, Penthouse Suite 83 84 City Orlando FL 85 Zip Code 32801	
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:  DATE: 6/17/97			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE President/Director ☒ Change ☐ Addition 12 NAME Terry Reynolds 13 STREET ADDRESS 1202 W. Central Blvd. 14 CITY- ST- ZIP Orlando, Florida 32805 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY- ST- ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY- ST- ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY- ST- ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY- ST- ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 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.		000002246140 -07/24/97--01009--006 ***558.75 7-23 JP	
SIGNATURE: X  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 6/17/97 DAYTIME PHONE: 407-649-9500	

CR2E034 (9/96)