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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # P96000039321

IL PRECISION CARPET SERVICES INC.

| | ** | | |
|-------------------------------------|--|--|--|
| cipal Place of Business | Mailing Address | | |
| Stephenson dr Melbourne fl 32904 | 215 STEPHENSON DR WEST MELBOURNE FL 32904 | | |
| | | | |
| rincipal Place of Business | 2a. Mailing Address | | |
| | 26 | | |

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| Feb 05, 1999 8:00am |
| Secretary of State |

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|--|--|---------------------------------------|--|--|---|--|-------------|-------------------|--|
| | | | | | | 3. Date Incorporated or Qualifed 05/02/1996 | | | |
| ncipal Pl | lace of Business | 2a. Mailing Address | | | ••• | 4. FEI Number | Ar | plied For | |
| noipai v | 400 4. 1 40051 | 26 | | | | 59-3378457 | | t Applicable | |
| ite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | | \$8.75 | . , | |
| 27 | | | | | | Certificate of Status Desired Fee Required | | | |
| y & State City & State | | | | | | 6. Election Campaign Financing \$5.00 Mag | | | |
| | | 28 | | | | Trust Fund Contribution | Added | to Fees | |
| | Country | _ Zip | Cot | untry | | 8. This:corporation owes the current year Inta | ngible | | |
| | 25 | 29 | 30 | | | 1 | ∐Yes | □No | |
| | 9. Name and Address of Curre | | -1001 | | | 10. Name and Address of New Registered A | gent | | |
| | 5. Italile and Address of Curr | | | 81 | Name | | | | |
| LAMO | OUE OADVE | | | 1.1 | Mamo | | | | |
| | OTENIENOM OD | ent of the | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | | * ** | | | | e de la companya del companya de la companya del companya de la co | | | |
| WES | ST MELBOURNE FL 32904 | | | 83 | | | 11 1 | | |
| | | | | | | | | | |
| | | | | 84 | City | Fi | 85 Zip | Code " | |
| a, | | | | | | <u> </u> | | | |
| ursuant | to the provisions of Sections 607.05 | 502 and 607.1508, Florida Stati | utes, the a | above | -named corpo | oration submits this statement for the purpose of c n's board of directors. I hereby accept the appoin | hanging its | registered | |
| ffice or re | egistered agent, or both, in the Stat | te of Florida. Such change was | authorize Iorida Stat | d by t | the corporation | n's poard of directors. I hereby accept the appoint | ımem as re | gistered | |
| yeni. i al | m familia with, and accept the oblig | ν | ionida Otal | | | 1/19 | laa | | |
| ATURE . | XXVII E | Janoue | re. n | 4 | alasahas | when reinstating) · DATE | 77 | | |
| | Signature, typed or plinted name of registered a | , , , , , , , , , , , , , , , , , , , | | | signature required | | DIDECTO | NDC IN 12 | |
| | | AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND | | | |
| | P | ☐ DELETE | 1.1 T | ITLE | | ₹ <i>4</i> 4 | Change | ☐ Addition | |
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| ADDRESS | A COMPANIE I LOCALI DE | | 135 | 1.3 STREET ADDRESS | | | | | |
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| ADDRESS | | | | | | | | | |
| ADDRESS | | | 235 | TREET | ADDRESS I | | | | |
| | | | - 1 | | ADDRESS | | | | |
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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.