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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P96000047465 (5)

RUGMARK INC.

STREET ADDRESS

												111F1 111 1811
Principal Place of Business Mailing Address									i indiinat iin idiid diiii daiii daii	4 \$134 \$6341 61	107 LEBNI BIBIB	B)(6(8(I) (63)
1855 GRIFFIN ROAD #A-462 DANIA FL 33004				1855 GRIFFIN ROAD #A-462 Dania FL 33004								
									DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualified			
									06/05/1996			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			Applied For
21				26					65-0687711		1	Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
22				27								Required
City & State				City & State					6. Election Campaign Financing			May Be
23			28	Zip Country				Trust Fund Contribution			to Fees	
Zip	Country			- , '			bunity		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
24 25 A Name and Address of Current F				29 30 30 september 29 Agent				10. Name and Address of New Registered Agent				
Name and Address of Current Registered Agent CORPORATE AGENTS, INC.								lame				•
1201 HAYS STREET						82	S	Street Addre	ess (P.O. Box Number is Not Accept	able)		
TALLAHASSEE FL 32301						83	╫					
						84	C	City		FI	85 Zip	Code
11. Pursuant	to the provis	sions of Sections 607.0	502 and	607.1508. Flo	orida Statute	s, the above	e-ni	amed corpo	oration submits this statement for the on's board of directors. I hereby acc	purpose o	of changing	its registered
office or r	egi s tered ag	gent, or both, in the Sta ith, and accept the ob	te of Flo	of Section 60	ange was at	thorized by	y th	e corporation	on's board of directors. I hereby acc	ept the ap	pointment a	s registered
_	ım ı a mıllar w	nui, and accept the ob	ilyadoris	or, section of	77.03 0 3, 1 101	ida Statutos	э.					
SIGNATURE	Sloneturn typed	or printed name of registered	agont and to	itle if applicable	(NOTE	Registered Age	enl s	ignature require	d when reinstating)	DATE		
12.		OFFICERS A							ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	DRS IN 12
TITLE	P				DELETE	1.1 TITLE					Change	Addition
NAME	SCHWA	ARTZ, HERMAN		1.2 N			1.2 NAME					
STREET ADDRESS 3925 N. MERIDIAN AVE. #2				1.3 S ¹			ADO	DRESS				
CITY-ST-ZIP MIAMI BEACH FL 33140				1.4 C			ST-Z	IP				
TITLE	<u> </u>				DEL ET E	2.1 TITLE				-	Change	☐ Addition
NAME						2.2 NAME						
STREET ADDRESS					2.3 STREET ADDRES			DRESS				
CITY-ST-ZIP						2. 4 CITY-5			•	• •		
TITLE	 				DELETÉ	3.1 TITLE					Change	Addition
NAME						3.2 NAME						
STREET ADDRESS						3.3 STREET	r adi	DAESS				
CITY-ST-ZIP						3.4. CITY- 3	ST-2	ZIP				
TITLE	 				DELETE	4.1 TITLE				_	Change	Addition
NAME						4. 2 NAME						
STREET ADDRESS						4.3 STREET		DRESS				
CITY+ST-ZIP						4.4 CITY-S						
TITLE					DELETE	5.1 TITLE					Change	Addition
NAME				_		5.2 NAME						
STREET ADDRESS						5.3 STREET	r ADr	DAESS				
						5.4 CITY-S						
CITY-ST-ZIP TITLE					DELETE	6.1 TITLE	J1-2				Change	Addition
NAME					-	62 NAME					_	

CITY-ST-ZIP

14. I 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.

6.3 STREET ADDRESS

FILED Mar 20 1998 8:00am Secretary of State