## 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 # P96000055260 (9)

FRANK ROY CARPET SERVICES, INC.

## FILED Mar 30 1998 8:00am Secretary of State



				8481 844 <u>8</u> 41818 21111 8811 4881
Principal Place of Business	Mailing Address			4141 2114 11212 31111 3311 1231
2556 10 ST	2556 10 ST			
208 Sarasota FL 35237	208 Sarasota Fl 34237		DO NOT WRITE IN THIS SPACE	
US	US		3. Date Incorporated or Qualified	
			06/28/1996	
2. Principal Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21 283 TAMIAMI CIRCLE V	1 26 2836 TAMIAMI CI	RCKE W	65-0676064	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	City & State			Fee Required
City & State  23 SARASOTA FLORIDA	28 SARASOTA F	LORIDA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Country	This corporation owes or has paid the	
24 34 23 U.S.A	29 34234 30	U.S.A.	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curren			10. Name and Address of New Register	ed Agent
AMERILAWYER CHARTERED		81 Name		
343 ALMERIA AVENUE		82 Street Address (P.O. Box Number is Not Acceptable)		
CORAL GABLES FL 33134		Stroot Floor	rose (F.O. Box (Valles) is not vicespiesely	
		83		
		84 City		85 Zip Code
			F	
<ol> <li>Pursuant to the provisions of Sections 607.050: office or registered agent, or both, in the State</li> </ol>	2 and 607.1508, Florida Statutes, the	above-named corp	poration submits this statement for the purposition's board of directors. I bereby accept the	e of changing its registered
agent. I am familiar with, and accept the obliga			tions board of directors. Thorough absorpt the	Appointment as registered
SIGNATURE				
Signature, typed or printed name of registered age  12. OFFICERS AND		tered Agent signature requi	red when reinstating) DAT  ADDITIONS/CHANGES TO OFFICERS A	
12. OFFICERS AND		1 TITLE	ADDITIONS/CHANGES TO OTTICENS A	Change Addition
NAME ROY, FRANK		2 NAME		
STREE		3 STREET ADDRESS		
		4 CITY-ST-ZIP		
TITLE Plew address:	DELETE 2:	1 TITLE		Change Addition
TITLE New address:  NAME 2836 Tamuami Circ 1	22	2 NAME	•	
STREE STREE	23	3 STREET ADDRESS		
STREE Darasota FL 34234	2.	4 CiTY-ST-ZiP		
TITLE	DELETE 3.	1 TITLE		☐ Change ☐ Addition
NAME	33	2 NAME		
STREET ADDRESS	3.	3 STREET ADDRESS		
CITY-ST-ZIP		4. CITY-ST-ZIP		
TITLE	☐ DELETE 4.	1 TITLE		Change Addition
NAME	4.	2 NAME		
STREET ADDRESS	4.3	3 STREET ADDRESS		
CITY-ST-2IP		4 CITY-ST-ZIP		
TITLE		1 TITLE	•	Change Addition
NAME		2 NAME		
STREET ADDRESS	5.3	3 STREET ADDRESS		
CITY-ST-ZIP		4 CITY-ST-ZIP		Ohomo 44491
TITLE		1 TITLE		☐ Change ☐ Addition
NAME		2 NAME		
STREET ADDRESS		3 STREET ADDRESS		
CITY-ST-ZIP	6.4	4 CITY-ST-ZIP	Cashing 440 07/07/3 Fire 244 Cashing 17 19	
14. I hereby certify that the information supplied wi	th this filing does not qualify for the	exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

4. 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 of on an attachment with an address.

NONATURE.

3- 25-92 (441.) 359-873