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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600098593 (2)

PATRICK'S CARPET COPANY, INC.

TATION O CARLET COLANT, MO.								I RECOVERS HE COLOR BOOK EXPLENDED THAT IS COLOR FROM THE SERVE OF A COLOR FROM THE			
Principal Plac	o of Business		Mailing Address								
4834 CANDIA 8 CAPE CORAL I	STREET		Mailing Address 4834 CANDIA STREET CAPE CORAL FL 33904-9030								
										Date Incorporated or Qualified 12/02/1996	
2. Principal P	lace of Busin		2a. Mailing Address						4. FEI Number Applied For		
21	# ala		26						65-0732082 Not Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired See Required Fee Required	
City & State				City & State						6. Flection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip		Country		Zip			Country			8. This corporation has liability for intangible tax under s. 199.032,	
24	4					30	0			Florida Statutes	
			s of Current R	egister	red Agent		B1	Mona	<u>·</u>	10. Name and Address of New Registered Agent	
	AVALLE, MI						61	Name	₿		
12931 EAGLE ROAD CAPE CORAL FL 33909							82	82 Street Address (P.O. Box Number is Not Acceptable)			
							83				
							84	City		FL 85 Zip Code	
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											
12.	signature, typed		FICERS AND D			(NOTE: Heg	13.	ni signatu	ire required	d when reinstating) DATE _ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 10	
TITLE	D		102/10/11/10 0		DELETE		1.1 TITLE	• • • •	1/2-	- P 1	
NÁME ·	MIRAVALL	E, PATRICI	(ŀ	1.2 NAME		Pay	reick Miravalle	
STREET ADDRESS	12931 EA	GLE ROAD	_				1.3 STREET	ADDRESS	129	1310 pale Rd	
CITY-ST-ZIP	CAPE CO	RAL FL 339	09				1.4 CITY - S	T- Z IP	CA	pecaral FL 33909	
TITLE					☐ DELETE		2.1 TITLE		Ο	Change Addition	
NAME						1	2.2 NAME		Mi	ichelle Mir Avalle	
STREET ADDRESS							2.3 STREET	ADDRESS	1 (131 Cagle Rd	
CITY-ST-ZIP	<u>-</u>				Dougra		2.4 CITY - S	1-ZIP	CA	pe Coral, FL 33909	
TITLE NAME					☐ DELETE		3.1 TITLE			Change Addition	
STREET ADDRESS	ļ						3.2 NAME 3.3 STREET	ADDRECC			
CITY-ST-ZIP							3.4 CITY - S		`		
TITLE	<u> </u>				DELETE		4.1 TITLE	11- 211	+	Change Addition	
NAME							4. 2 NAME				
STREET ADDRESS							4.3 STREET	ADDRESS			
CITY-ST-ZIP							4.4 CITY-S	T - ZIP		<u> </u>	
TITLE					☐ DELETE		5.1 TITLE			Change Addition	
NAME							5.2 NAME				
STREET ADDRESS							5.3 STREET			·	
CITY-ST-ZIP	 		······································		DELETE		5.4 CITY-S	f-ZIP	- 	Change Addition	
TITLE NAME					- Officie		6.1 TITLE 6.2 NAME			☐ Change ☐ Addilion	
STREET ADDRESS						- 1	6.3 STREET	NUUDE GO			
CITY-ST-ZIP							6.4 CITY-S				
14. I do herel	by certify the	t the informat	ion supplied wi	th this	filing does not q	ualify for	the exe	motion	stated in	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 or Block 14 or Block 15 or Block 16 or Block 17 or Block 16 or Block 1											