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PROFIT CORPORATION ANNUAL REPORT

1997

R&R QUALITY CARPET, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 15 1997 8:00am Secretary of State

DOCUMENT # P96000100708 (2)

Principal Place of Business Mailing Address 301 EAST HIGHWAY 50 301 EAST HIGHWAY 50 **CLERMONT FL 34711-2519** CLERMONT FL 34711 3. Date Incorporated or Qualified 3a. Date of Last Report 12/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 9-3422546 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zio Country Zip 8. This corporation has liability for Intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HUGE, RONALD C 301 EAST HIGHWAY 50 82 Street Address (P.O. Box Number is Not Acceptable) **CLERMONT FL 34711** 83 84 City 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 Stgr aton: Typed or printed name of registered agent and title 4 applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1 1 TITLE TiT: F HUGE, RONALD C 1.2 NAME NAME 14241 MANCHESTER ROAD STREET ADDRESS 1.3 STREET ADDRESS **GROVELAND FL 34738** 1.4 CITY-ST-ZIP CHTY - S1 - Z0 Change Addition DELETE TITLE 21 TITLE 2.2 NAME NAMI STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP City - \$1 - 7IP Change Addition DELETE THE 3.1 TITLE 3.2 NAME NAM: STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - 2H 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THU 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS C-TY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE THILE **5.2 NAME** NAMÉ 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP City-St-ZiP DELETE Change Addition 6.1 TITLE TITLE

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 frue 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY: ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF BIOMING OFFICER OR DIRECTOR

4/23/97 31

Daytime Phone # 0000000