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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Apr 27 1998 8:00am

Secretary of State

4/20/98 (205)823-8883

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000004373 (1)

OLLET CARPETS & VERTICALS CORP.

Principal Place of Business Mailing Address 7700 W 24TH AVE. 7700 W 24TH AVE. RAY 2 RAY 2 DO NOT WRITE IN THIS SPACE HIALEAH FL 33012 HIALEAH FL 33012 3. Date Incorporated or Qualified 01/15/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zıp Zip Country 8. This corporation owes or has paid the current year Intangible X Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **OLLET, ORESTES 1280 61ST PLACE** Street Address (P.O. Box Number is Not Acceptable) 82 HIALEAH FL 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 Stgrahme, typod or profed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITEF 11 TITLE **OLLET, ORESTES** CR2E034 1.2 NAME NAME 1280 W 61 PLACE. 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY - ST - ZIP 1.4 CITY - ST- ZIP DELETE Addition TITLE 2.1 TITLE **OLLET, NANCY** NAME 2.2 NAME 1280 W 61 PLACE. STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS **33 STREET ADDRESS** 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 41 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conforation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in