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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P9700005881 (2) DOCUMENT #
1. Corporation Name

ELITE CARPETS, INC.

Principal Place of Business

Mailing Address

FILED Jan 23 1998 8:00am Secretary of State



4350 N.W. 59TH STREET 4350 N.W. 59TH STREET FORT LAUDERDALE FL 33319 FORT LAUDERDALE FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/1997 2. Principal Place of Business
21 7280 W. MCNAB 2a. Mailing Address 4. FEI Number Applied For 150 7280 W. MC. NAB RO 21 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 4221 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing LAUDERDALE NORTH LAUDERDALE NONTH П Trust Fund Contribution Added to Fees ^{Zip} 33068 8. This corporation owes or has paid the current year Intangible U.S.A 33068 Personal Property Tax due June 30. Yes □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **HOWITT. STUART** 441 S. STATE ROAD 7 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 15 83 MIAMI FL 33068 Zip Code 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ■ DELETÉ Change Addition 1.1 TITLE TITLE **BLANCO, JORGE** 1.2 NAME NAME 4350 N.W. 59TH STREET STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33319 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-S1-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP ☐ DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$T-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETÉ ☐ Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 14. Thereby 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