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 #

P97000007821 (6)

THE RUG INN, INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							l abolităti ili	B CRISS IMBAT MBATS MBISS	1 8 8 1 1 8 8 1 1 1 1 1 1		o digar ilbi fabi
8573 NW 2ND STREET CORAL SPRINGS FL 33071 8573 NW 2ND STREET CORAL SPRINGS FL 33071 CORAL SPRINGS FL 3											
				W/I			DO NOT WRITE IN THIS SPACE				
							3. Date Incorpor	ated or Qualified			
							01/27/19	97			
2. Principal Place of Business			2a. Mailing Address				4. FELNumber	107777	480	A	pplied For
21 Suite Ant 4 Ata			26				60-	0 //2	cy -		lot Applicable
Sulte, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.			5. Certificate of 5	Status Desired			Additional leguired	
City & State		27	7 City & State			A 51 11 0					
23		28	28				6. Election Camp Trust Fund Co				May Be I to Fees
Zip Country			Zip Country				+				
24 25 2			30				8. This corporation owes or has paid the current year Intergible Personal Property Tax due June 30. Yes No				
	g, Name and Address of Currer		tered Agent	17.71			10. Name and Ad	 			
,	ZATKOWSKY, BRIAN				81	Name					
8573 NW 2ND STREET CORAL SPRINGS FL 33071					82 Street Addre		ess (P.O. Box Numbe	er is Not Accenta	hle)		
						22017.0010	dates (1.5. Box Nation is not redeptable)				
					83					·,,	
					84	City			FL	85 Zip	Code
11. Pursuant	t to the provisions of Sections 607.050	02 and 60	07.1508, Florida Statul	tes, the at	00V6	e-named corpo	oration submits this s	statement for the	purpose of	changing i	its registered
l office or	registered agent, or both, in the State am familiar with, and accept the oblig-	ol Floric	ta. Such change was	authorized	υdic	the corporatio	on's board of directo	rs. I hereby acce	pt the appo	ointment as	s registered
SIGNATURE	, .										
	Signature, typeid or printed name of registered ago				Age.	nt signature required			TAG	· · · · · · · · · · · · · · · · · · ·	
12. TITLE	PSD OFFICERS AN	ID DIREC	DELETE	13.			ADDITIONS/CH	ANGES TO OFFI	CERS AND		
NAME	ZATKOWSKI, BRIAN		□ offert	1.1]]]						L Change	Addition
STREET ADDRESS	8573 NW 2ND STREET			1.2 NA							
CITY-ST-ZIP	CORAL SPRINGS FL 33071					ADDRESS					
TITLE	CONTRACTOR OF THE COOP I		DELETE	1.4 CIT 2.1 Til		1-214				Change	Addition
NAME				2 2 NA		1			'		
STREET ADDRESS						ADDRESS			٠.		
CITY-ST-ZIP				2. 4 CI							İ
TITLE	 		DELETE	3 1 TIT						Change	Addition
NAME	1			3 2 NA	ME					~	•
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP	<u> </u>			3.4. CI							
TITLE			☐ DELETE	4.1 TIT						Change	Addition
NAME				4. 2 NA	ME						
STREET ADDRESS				4.3 STF	REET	ADDRESS					
CITY-ST-ZIP				4.4 CIT	Y - \$1	r- ZIP					
TITLE			DELETE	5.1 TIT	LE					Change	Addition
NAME				5.2 NAI	ME						
STREET ADDRESS				5.3 STE	REET A	ADDRESS					
CITY-ST-ZIP				54 CH	Y-SI	- 7IP					
TITLE	1		LOCICAL			T					1
NAME			DELETE	61 1111	LE					i Change	Addition
			□ Dt Lt #£	6.2 NA					l	Change	L Addition
STREET ADDRESS			□ Detes€	6.2 NA	ME	ADDRESS			l	Change	L_I Addition

merely beauty that the information supplied with this tilling 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 is 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, or on an attachment with an address.