

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 27, 2002 8:00 am
Secretary of State

05-13-2002 90090 038 ***163.75

DOCUMENT # **P97000019065** ✓

1. Entity Name

Carpet Tann, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6863 S.W. 20TH STREET

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 590604

Suite, Apt. #, etc.

City & State

Pompano Beach, FLORIDA

Zip

33068

Country

U.S.A.

City & State

Fort Lauderdale, Florida

Zip

33359

Country

U.S.A.

4. FEI Number

65-0724740

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Murillo Jorge

Street Address (P.O. Box Number is Not Acceptable)

6863 S.W. 20TH STREET

City

Pompano Beach,

FL

Zip Code

33068

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☒

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGER
JORGE ARTURO MURILLO
6863 S.W. 20TH STREET
Pompano Beach, Florida 33068-4841**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/2002

Date

(954) 410-3213

Daytime Phone #

CR2E034B (12/01)

Attachment
#P97000019065 6982

April 24, 2002

TO: DIVISION OF CORPORATIONS.

FROM: CARPET JAMM, INC.

REF: REQUESTING FORMAUER.

PLEASE I WOULD LIKE TO KNOW THE REASON, WHY I'M NOT RECEIVING THE FORM EVERY YEAR. THE LAST AND THE FIRST TIME THAT WE RECEIVED IT, WAS IN JANUARY 2000 IN THE SAME ADDRESS.

IF, THERE IS SOMETHING WRONG, PLEASE COULD YOU LET ME KNOW?.

THANK YOU VERY MUCH, I REALLY APPRECIATE IT.

CARPET JAMM, INC.
SINGAPORE
P.O. BOX 490504
FT. LAUDERDALE, FL 33359
(954) 410-9213
CARPET/JAMM, INC.