FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000036812

1. Corporation Name

CREATIVE CARPETS BY CONTRACT CARPETS, INC.

Principal Place of Business	Mailing Address
988 BICHARA BLVD.	988 BICHARA BLVD.
LADY LAKE FL 32159	LADY LAKE FL 32159

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90058 037 ***150.00



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Principal Place of Bu	usiness	Ma	iling Address			ļ				
88 BICHARA BLVD. ADY LAKE FL 32159			BICHARA BLVD. DY LAKE FL 32159				ı	DO NOT WRITE IN THIS	SPACE	=
								Date Incorporated or Qualifed 04/23/1997		
2. Principal Place o	f Business	2a.	Mailing Address			-	4.	FEI Number		Applied For
2, ((m.s.ps. : 1200 a		26	-					<u>59-3446315</u>		Not Applicable
Suite, Apt. #, etc	-	27	Suite, Apt. #, etc.	_				Certificate of Status Desired	•	.75 Additional ee Required
City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution	-	i.00 May Be dded to Fees
3] Zio	Country	201	Zip	Countr	у_		8.	This corporation owes the current year In	tangible	,
4	25	29	3	ո	•	'	-	Personal Property Tax.	☐Ye	
4)	Name and Address of Cur			<u> </u>	_		10.	Name and Address of New Registered	Agent	
	Hame and Address of Os.	Tont Hogic		8	1	Name				
	eldene l Rio drive			8:	2	Street Addres	ss (P	.O. Box Number is Not Acceptable)		
	KE FL 32159			8	3	 ,				
				8		City		FL	85	Zip Code
-45	provisions of Sections 607.0 pred agent, or both, in the Standillar with, and accept the ob	ate of Fiori	na. Such channe was auu	HUHZEU D	IY LI	named corporation	ation 's bo	n submits this statement for the purpose o pard of directors. I hereby accept the appo	f chang intment	ing its registered as registered
SIGNATURE		and title	(NOTE: R	Penistered An	fner	signature required	when i	einstating) DATE		
	ure, typed or printed name of registered OFFICERS			13.		. 9 244.4		ADDITIONS/CHANGES TO OFFICERS A	ND DIR	ECTORS IN 12
12.	OFFICERS	VIAD DIVE	.0.0.0						=10	Addition

Ū			1
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Agent signature re-	quired when reinstating) DATE
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HEARNS, DARREN A.	1.2 NAME	
STREET ADDRESS	8411 S. 132ND CT.	1.3 STREET ADDRESS	
CITY-ST-ZiP	BELLEVIEW FL 34420	1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	V DELETE	2.1 TITLE	Change Addition
NAME	HEARNS, DANIEL J.	2.2 NAME	
STREET ADDRESS	17678 S. E. 132ND CT.	2.3 STREET ADDRESS	·- ·
CITY-ST-ZIP	WEIRSDALE FL 32195	2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	CEO DELETE	3.1 TITLE	Change Addition
NAME	HEARNS, ELDENE L.	3.2 NAME	•
STREET ADDRESS	202 DEL RIO DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32159	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TILE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ DELETÉ	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	For the section with the section of	5.4 CITY-ST-ZIP	Change Addition
TITLE ,	□ CELETE	6.1 TITLE	Change
NAME JE	F Free :	8.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY OT 710		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 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, with all other like empowered.

SIGNATURE:

4-26-99 352-753-7502