PROFIT CORPORATION \*ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90194 048 \*\*\*150.00

City & State  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  Zip  Country  Zip  Country  8. This corporation owes the current year Intangible	1. Corporation	MENT # P98000( D CARPET OUTLET, INC.	004295		1 (884) DAI (10 1818) (8) (8) 80 (8 88) (8 88) (8 88) (8 88) (8 88) (8 88) (8 88) (8 88) (8 88) (8 88) (8 88)		
TISSE CAPITAL CIPICE NE TALLAHASSEE FL 2201)	Original Bloom	of Business	Mailing Address				
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   V   Applied For   11   12   1988   V   Applied For   12   12   12   12   12   12   12   1	1196-E CAPITAL CIRCLE NE 1196-E CAPITAL CIRCLE NE				DO NOT WRITE IN THIS SPACE		
Principal Place of Business   2a. Mailing Address   4. FEI Number   Application					3. Date Incorporated or Qualifed		
Suite, Apt. #, etc.	2 Diminut	an of Business	2a Mailing Address			d For	
Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Scriffcate of Status Desired   \$8.75 Additional received City & State   City & State   City & State   Status Desired   \$5.00 May 80 Added to Fees    Zip   Country   Zip   Z		ace or business	<u> </u>				
City & State	Suite, Apt.	#, etc.			5 Contiferate of Status Desired \$8.75 Addi	itional	
City & State  23	22				Fee Requir	<del></del>	
Zip Country Zip Country Zip Country 2	City & State		<b>⊢</b> , ′				
GLOVER, RICHARD A 1196-E CAPITAL CIRCLE NE TALLAHASSEE FL 32301  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 agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent and accept the obligation of . Section 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent family and accept the obligation of . Section 607.0503, Florida Statutes, the above-named corporation's board of directors. I heraby accept the application agent agent family and accept the obligation of . Section 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent family and accept the obligation of . Section 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent family age		Country	<b>⊢</b> `			.	
GLOVER, RICHARD A 1196-E CAPITAL CIRCLE NE TALLAHASSEE FL 32301  11. Pursuant to the provisions of Sections 807 0502 and 807 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, 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, and accept the objection of, section-807 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE 1 D Change Addition  NAME 196-E CAPITAL CIRCLE NE 11-32 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  1196-E CAPITAL CIRCLE NE 1196-E CAPITAL CIRCLE N	24		· <u></u>	30		No	
GLOVER, RICHARD A 1196-E CAPITAL CIRCLE NE TALLAHASSEE FL 32301  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose or changing its registered office or registered agent. And the statement of the purpose or changing its registered office or registered agent. And a coopt the subgrations of section 607.0505, Florida Statutes.  SIGNATURE  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes that above-named corporation submits this statement for the purpose or changing its registered office or registered agent. And the statement of the purpose or changing its registered office or registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose or changing its registered agent. And the statement of the purpose of changing its registered agent. And the statement of the purpose of changing its registered agent. And the statement agent agent. And the st		9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Fjorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are both, in the State of Fjorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are both, in the State of Fjorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agratuate required when remutating).  ISIGNATURE  Signature, typed or phrieted same or registered agent and title if appointment as registered Agent agrature required when remutating).  ISIGNATURE  TITLE  D	1196-E CAPITAL CIRCLE NE			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Fjorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent are registered agent and accept the obligations of Sections 07.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and little if appointment as registered agent are registered agent and registered agent and registered agent and registered agent and registered agent appointment as registered agent agent and registered agent agent agent and registered agent agent and registered agent agent and registered agent agent agent agent and registered agent	IALL	ANASSEE PL 32301		83		1	
office or registered agent, or both, in the State of Fjorida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent after familiar with and accept the obligations of, Section 507, 0505, Floridal Statutes.  SIGNATURE  Signature, typed or printed name of registered agent with a policidols.  (INTE. Registered Agent signature required when reinstaining)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DATE  TITLE  DELETE  11 TITLE  DELETE  12 NAME  13 STREET ADDRESS  TALLAHASSEE FL 32301  TITLE  DELETE  21 TITLE  DELETE  21 TITLE  DAME  STREET ADDRESS  1196-E CAPITAL CIRCLE NE  TALLAHASSEE FL 32301  TITLE  DELETE  31 TITLE  DELETE  31 TITLE  DELETE  31 TITLE  DELETE  31 TITLE  DAME  STREET ADDRESS  CITY-ST-ZIP  TALLAHASSEE FL 32301  DELETE  31 TITLE  DELETE  31 TITLE  Change  Addition  Addition  Addition  Addition  Addition  Addition  ALCHY-ST-ZIP  TALLAHASSEE FL 32301  DELETE  41 TITLE  Change  Addition  Change  Addition  Change  Addition  ALCHY-ST-ZIP  TITLE  Change  Addition  ALCHY-ST-ZIP  TALLAHASSEE FL 32301  DELETE  41 TITLE  Change  Addition  Change  Addition  Change  Addition  ALCHY-ST-ZIP  TITLE  Change  Addition  Change  Addition  ALCHY-ST-ZIP  ALCHY-ST-ZIP  TALLAHASSEE FL 32301  DELETE  51 TITLE  Change  Addition  Change  Addition  ALCHY-ST-ZIP  Change  Addition  ALCHY-ST-ZIP  Change  Addition  ALCHY-ST-ZIP  ALCHY-ST-ZIP  Change  Addition  ALCHY-ST-ZIP	}			84 City	FL 85 Zip Cod	е	
12.	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE						
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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 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.

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-97

6 56-2666 Daytime Phone #

Change

Addition

CD2E034 (11/08)