


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90234 023 ***150.00

DOCUMENT # P99000100314 1. Entity Name WILLIAMS'S CARPETS CORPORATION																													
Principal Place of Business 8000 NW 75 AVE TAMARAC FL 33321 US			Mailing Address 8000 NW 75 AVE TAMARAC FL 33321 US																										
2. Principal Place of Business <i>WILLIAMS'S Carpet Corp.</i> Suite, Apt. #, etc. 8000 NW 75 AVE City & State TAMARAC, FLA. Zip 33321			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country BROWARD.																										
4. FEI Number 65-0977298			Applied For <input type="checkbox"/> Not Applicable																										
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			6. Name and Address of Current Registered Agent VALLEJO, ROSA 8000 NW 75 AVE TAMARAC FL 33321																										
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			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. I am familiar with, and accept the obligations of registered agent.																										
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>VALLEJO, ROSA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8000 NW 75 AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMARAC FL 33321</td> <td></td> </tr> </table>			TITLE	P	<input type="checkbox"/> Delete	NAME	VALLEJO, ROSA		STREET ADDRESS	8000 NW 75 AVE		CITY-ST-ZIP	TAMARAC FL 33321		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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1st MOORE

CR2E034 (10/04)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #