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PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S54215 (6)

1. Corporation Name

BROWARD DISCOUNT CARPET AND TILE, INC.

FILED

95 JUL -7 AM 9:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

2401 NE 4TH AVE
POMPANO BCH FL 33064

Mailing Address

2401 NE 4TH AVE
POMPANO BCH FL 33064

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/20/1991

3a. Date of Last Report

04/08/1994

4. FEI Number

65-0289131

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

MOLINEUX, SKYE J
4831 NE 28 AVE
SUITE 40
LIGHTHOUSE FL 33064

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MOLINEUX, SKYE JOHN
STREET ADDRESS 4831 N.E. 28TH AVE.
CITY - ST - ZIP LIGHTHOUSE POINT FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

14.1 TITLE

14.2 NAME

14.3 STREET ADDRESS

14.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

21.1 TITLE

21.2 NAME

21.3 STREET ADDRESS

21.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

31.1 TITLE

31.2 NAME

31.3 STREET ADDRESS

31.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

41.1 TITLE

41.2 NAME

41.3 STREET ADDRESS

41.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

51.1 TITLE

51.2 NAME

51.3 STREET ADDRESS

51.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

SKYE MOLINEUX

6/28/95 (305) 785-9299