

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

APPROVED  
AND  
FILED

96 MAY -1 PM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # S54215 (6)

1. Corporation Name

BROWARD DISCOUNT CARPET AND TILE, INC.

Principal Place of Business

2401 NE 4TH AVE  
POMPANO BCH FL 33064

Mailing Address

2401 NE 4TH AVE  
POMPANO BCH FL 33064

3. Date Incorporated or Qualified

05/20/1991

3a. Date of Last Report

07/07/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

Phyllis Mae Tutor

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

4831 N.E. 28th Avenue

83

84 City

Lighthouse Pt FL

85 Zip Code

33064

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, Section 607.1508, Florida Statutes.

SIGNATURE

Phyllis Mae Tutor

Phyllis Mae Tutor

DATE

4-25-96

12. OFFICERS AND DIRECTORS

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

DIRECTOR/CHAIRMAN ☒ Change ☐ Addition  
Phyllis Mae Tutor  
4831 N.E. 28th Avenue  
Lighthouse Pt, FL 33064

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

600001816256  
-05/10/96--01024--001  
\*\*\*\*200.00 \*\*\*\*200.00

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 119.07(3)(k), 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 the attachment with an address.

SIGNATURE

Phyllis Mae Tutor

4-25-96 (954) 785-9299

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phyllis Mae Tutor

DATE

Signature Printed

CR2E034 (12/95)