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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S61251

(2)

GREAT & GORGEOUS CARPETS, INC.

FILED
Jan 17 1997 8:00am
Secretary of State

Principal Place of Business 12773 FOREST HILL BLVD SUITE 101 WEST PALM BEACH FL 33414			Mailing Address 12773 FOREST HILL BLVD SUITE 101 WEST PALM BEACH FL 33414-4761			3. Date Incorporated or Qualified 3a. Date of Last Report			
						06/20/1991		1/1996	
2. Principal Pi	ace of Business	28	, Mailing Address		······································	4. FEI Number			oplied For
21	4	26	C. Ja A.I. H. ata			65-0268241			ot Applicable
Suite, Apt		27	Suite, Apt. #, etc.	L		5. Certificate of Status Desired			Additional equired
City & State)	\vdash	City & State			6. Election Campaign Financing			May Be
23 Zip	Country	28	Zip	T Cor	untry	Trust Fund Contribution			to Fees
24	25	29	219	30	arth y	This corporation has liability for Elorida Statutes	intangible t Yes [. 199.032,
24	g. Name and Address of Current		stered Agent	[30]		10. Name and Address of New Re			
WITH	KOWSKI, RONALD				81 Name				
	98 WEST FOREST HILL BLVD				82 Street Ad	dress (P.O. Box Number is Not Acceptate	ole)		
SUIT	TE 105B								
WES	ST PALM BEACH FL 33414				83				
					84 City			85 Zip	Code
						progration submits this statement for the p	FL		
agent. Lar SIGNATURE	m familiar with, and accept the obligation of the obligation of protections of the obligation of the o	tions o	of, Section 607.0505, F	Iorida Sta	tutes.	ation's board of directors. I hereby accessories board of directors. I hereby accessories board of directors.	DATE		
12.	OFFICERS AND	DIRE		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PST CTEINIUODNI CTENENI		☐ DELETE	1.1 1				Change	Addition
NAME	STEINHORN, STEVEN			1.2 N					
STREET ADDRESS	12773 FOREST HILL BLVD WEST PAM BEACH FL			1	TREET ADDRESS				
CITY-ST-ZIP TITLE	D D		DELETE	1.4 C	ITY-ST-ZIP			Change	Addition
NAME	STEINHORN, STEVEN			2.2 N					
STREET ADDRESS	12773 FOREST HILL BLVD				TREET ADDRESS				
CITY-ST-2IP	WEST PAM BEACH FL				CITY-ST-ZIP				
TITLE		· · · · · · · · · · · · · · · · · · ·	☐ DELETE	3.1 T				Change	Addition
NAME				3.2 N	IAME				
STREET ADDRESS				3.3 \$	TREET ADDRESS				
CITY-ST-ZIP					CITY-ST-ZIP				
TITLE			☐ DELETE	4.1 T	ŀ			Change	Addition
NAME					NAME				
STREET ADDRESS					TREET ADDRESS				
CITY-S1-ZIP			DELETE		ITY-ST-ZIP			Change	Addition
TITLE NAME			טנננונ	5.1 T 5.2 N				Ollarige	LL AUGUDII
STREET ADDRESS					TREET ADDRESS				
CITY-ST-ZiP					ITY - ST- ZIP				
TITLE			DELETE	5.4 C				Change	Addition
NAME			_	6.2 N					
STREET ADDRESS					TREET ADDRESS				
CITY-ST-ZIP					ITY - ST - ZIP				
informatio I am an of	by certify that the information supplied in indicated on this annual report or si fficer or director of the corporation or in Block 12 or Block 13 if changed, or	upplen the rec	nental annual report is ceiver or trustee empo	lify for the true and wered to	exemption stat	ed in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega port as required by Chapter 607, Florida S	al effect as Statutes; ar	certify that if made un id that my	the der oath; tha name