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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S61251

1. Corporation Name

GREAT &	R GORGEOUS CARPETS, IN	IC.							
Principal Place	of Business	Mailing Address					#	ist Bibli Achti	81811 81 <u>8</u> 11 1881
12773 FOREST HILL BLVD 12773 FOREST HILL BLVD									
SUITE 101 SUITE 101						l .	. 7. 73	•	
WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 06/20/1991			
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		Ar	pplied For
26						65-0268241			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1			5. Certifcate of Status Desired		T	Additional equired
City & State City & State						6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country	у		8. This corporation owes the curre	nt year Inta	ngible	,
24	25	29 3	0			Personal Property Tax.		Yes	TZNo
	9. Name and Address of Curren	Registered Agent				10. Name and Address of New Re	gistered A	igent	
			81	Na	me	and a second			
WITKOWSKI, RONALD 12798 WEST FOREST HILL BLVD			82	82 Street A		ss (P.O. Box Number is Not Acceptat	ole)	·	
SUITE 105B			83	3					
WEST PALM BEACH FL 33414				.				T1 -	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				City			<u>FĻ</u>		Code
l office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	ot Florida. Such change was auti	norizea by	/ tne c	ned corpo orporation	ration submits this statement for the parties accept accept	the appoin	tment as re	egistered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if continuels (NOTE: D	nountered Age	nt cional	ure required y	when reinstating)	DATE		
12.	OFFICERS AN		13.	an signa		ADDITIONS/CHANGES TO OFF		D DIRECT	ORS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE		1			Change	☐ Addition
NAME			1.2 NAME						
STREET ADDRESS	ACCORDING TO THE PLANT		1.3 STREE	1.3 STREET ADDRESS					ļ
CITY-ST-ZIP	APOT DAM DEADLE		1.4 CITY-5						+
TITLE			2.1 TITLE					☐ Change	☐ Addition
NAME	STEINHORN, STEVEN		2.2 NAME						ł
STREET ADORESS			2.3 STREE	2.3 STREET ADDRESS					ļ
CITY-ST-ZIP			2. 4 CITY-		1	•			}
TITLE		DELETE 3.11						Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	ET ADDR	ESS				ļ
CITY-ST-ZIP			3 4. CITY-	ST-ZIP					
TITLE	☐ DELETE 4.1 T		4.1 TITLE	4.1 TITLE				☐ Change	☐ Addition \
NAME			4 2 NAME	Ξ					ļ
STREET ADDRESS			4.3 STREE	T ADDR	ESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE	☐ DELETE 5.1 TI		5.1 TITLE			·. ·		Change	Addition
NAME			5.2 NAME		1		•		
STREET ADDRESS			5.3 STREE	ET ADDR	ESS		*		1
CITY-ST-ZIP			5.4 CITY-						
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAME						}
STREET ADDRESS			6.3 STREE	ET ADDR	ESS				

14. I hereby certify that the information supplied with this filling 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 finual reports 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 true ce employered 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 accurate that an address, with an other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

res.