ORATION NUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90094 002 ***150.00

DOCUMENT # S66001 1. Corporation Name

CARPETS BY DEBBIE, INC.

1999

Principal Place of Business

Mailing Address

3161 W. OAKLAND PARK BLVD. OAKLAND PARK FL 33311		61 W. OAKLAND PARK BLVD. IKLAND PARK FL 33311		_ • ^	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 07/15/1991		
2. Principal Place of Business	2a.	Mailing Address			4. FEI Number		Applied For
21	26				65-0275137		Not Applicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.					\$8.75 Additional Fee Required
City & State	28	City & State		,	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip Country	29	Zip Co	untry		This corporation owes the currer Personal Property Tax.	nt year Inta	ingible ☐ Yes ☐ No
9. Name and Address of Current	Regis	stered Agent	Τ		10. Name and Address of New Re	gistered A	.gent
BRONCHICK, KENNETH C., ESQ.			81	Name			
2734 E. OAKLAND PARK BLVD.			82	Street Addres	s (P.O. Box Number is Not Acceptab	le)	
SUITE 200			83				
FT. LAUDERDALE FL 33306							, ,
×.			84	City		FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 6	07.1508, Florida Statutes, the a	bove	-named corpor	ation submits this statement for the pr	urpose of o	hanging its registered

agent. I ai	m familiar with, and accept the obligations of, Section 607.050	5, Florida Statutes.	·				
SIGNATURE			uitrad when reinstating) DATE				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature req		0.01.40			
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PSD DELE	TE 1.1 TITLE	☐ Change	Addition			
NAME	DUMERVIL, DEBORAH A.	1.2 NAME					
STREET ADDRESS	2800 SOMERSET DR #J305	1.3 STREET ADDRESS					
CITY-ST-ZIP	LAUDERDALE LAKES FL	1.4 CITY-ST-ZIP					
TITLE	D DELE	TE 2.1 TITLE	☐ Change	☐ Addition			
NAME	DUMERVIL, DEBORAH A.	2.2 NAME					
STREET ADDRESS	2800 SOMERSET DR #J305	2.3 STREET ADDRESS					
CITY-ST-ZIP	LAUDERDALE LAKES FL	2.4 CITY-ST-ZIP					
TITLE	□ DELE	TE 3.1 TITLE	☐ Change	☐ Addition			
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TITLE	☐ DELE	TE 4.1 TITLE	☐ Change	Addition			
NAME		4. 2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	☐ DELE	TE 5.1 TITLE	☐ Change	Addition			
NAME		, 5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	☐ DELE	TE 6.1 TITLE	☐ Change	☐ Addition			
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
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14. I hereby certify that the information supplied with this filing 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 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, with all other like empowered.