

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 3:02

DOCUMENT # S76813 (2)
1. Corporation Name
ACTION CONTRACT CARPET, INC.

Principal Place of Business Mailing Address
4274 ELDRIDGE LOOP **4274 ELDRIDGE LOOP**
ORANGE PARK FL 32073-2172 **ORANGE PARK FL 32073-2172**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		25		08/29/1991	02/11/1994
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		59-3090739	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 Country		30 Country		<input type="checkbox"/>	\$5.00 May Be Added to Fees
26				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SILVERIA, MICHAEL C. 4275 ELDRIDGE LOOP ORANGE PARK FL				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ DATE _____
(Signature of officer or director of registered agent and title if applicable) (NOTE: This registered agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVERIA, MICHAEL C.	12 NAME	
STREET ADDRESS	4275 ELDRIDGE LOOP	13 STREET ADDRESS	
CITY - ST - ZIP	ORANGE PARK FL	14 CITY - ST - ZIP	
TITLE	D	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALTENBAUGH, VERNE	22 NAME	
STREET ADDRESS	4275 ELDRIDGE LOOP	23 STREET ADDRESS	
CITY - ST - ZIP	ORANGE PARK FL	24 CITY - ST - ZIP	
TITLE	D	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVEIRA, JUNE E	32 NAME	
STREET ADDRESS	4275 ELDRIDGE LOOP	33 STREET ADDRESS	
CITY - ST - ZIP	ORANGE PARK FL	34 CITY - ST - ZIP	
TITLE		4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

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(9)(a), 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 in an attachment with an address.

SIGNATURE:

June E. Silveira
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
June E. Silveira

1/18/95 904-264-9001