

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91314 036 ***150.00

DOCUMENT # V10388

1. Entity Name
PREMIER CARPETS, INC.



Principal Place of Business

15476 NW 77 CT

PMB #514

MIAMI LAKES FL 33016

Mailing Address

15476 NW 77 CT

PMB #514

MIAMI LAKES FL 33016

2. Principal Place of Business

2540 West 84 Street

Suite, Apt. #, etc.

Suite #3A

City & State

Hialeah FL

Zip

33016

Country

Dade

3. Mailing Address

2540 W. 84 Street

Suite, Apt. #, etc.

Suite #3A

City & State

Hialeah FL

Zip

33016

Country

Dade



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0309578**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLINGER, SCOTT R.

8180 NW 36 ST

#100

MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **CASTRO, LAZARO**
STREET ADDRESS **15476 N.W. 77 COURT, PMB #514**
CITY-ST-ZIP **MIAMI LAKES FL 33016**

TITLE **SD** ☐ Delete
NAME **BRIDGES, JOHN H**
STREET ADDRESS **15476 NW 77 COURT, PMB #514**
CITY-ST-ZIP **MIAMI LAKES FL 33016**

TITLE **TD** ☐ Delete
NAME **CASTRO, TAMARA**
STREET ADDRESS **15476 N. W. 77TH CT. #514**
CITY-ST-ZIP **MIAMI LAKES FL 33016**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **15803 N.W. 81 Court**
CITY-ST-ZIP **MIAMI LAKES, FL 33016**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **15803 N.W. 81 Court**
CITY-ST-ZIP **MIAMI LAKES, FL 33016**

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another I am empowered.

SIGNATURE:

TAMARA CASTRO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-03

Date

305-364-8934

Daytime Phone #

CR2E034 (10/02)