

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90367 015 ***150.00

DOCUMENT # **V165-03**

1. Entity Name

AMERICAN CARPET MASTER



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4631 CHAYENNE ROAD

3. Mailing Address

P.O. Box 616757

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE, FL

City & State

ORLANDO, FL

Zip

Country

34746

Zip

Country

32861

4. FEI Number

59-3120331

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

20037936

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current 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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY-ST-ZIP

**PRESIDENT
P.O. Box 616757
ORLANDO, FL 32861**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**V. PRESIDENT
AHMAD WAHAB
P.O. Box 616757
ORLANDO, FL 32861**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28-03

CR2E034B (12/02)

attachment

V16503

20037936

4/28/03 CORPORATE DETAIL RECORD SCREEN 1:10 PM
NUM: V16503 ST:FL ACTIVE/FL PROFIT FLD: 02/24/1992
LAST: AMENDMENT FLD: 02/28/1994
FEI#: 59-3120331
NAME : AMERICAN CARPET MASTERS, INC.
PRINCIPAL: 372 N. BUENA VISTA CHANGED: 10/01/97
ADDRESS ORLANDO, FL 32835 US
~~MAILING : P.O. BOX 618003~~ CHANGED: 10/01/97
ADDRESS ORLANDO, FL 32861
RA NAME : BASSEM, WAHAB NAME CHG: 05/01/94
RA ADDR : 8151 LESIA CIRCLE ADDR CHG: 03/03/99
ORLANDO, FL 32835
ANN REP : (2000) A 01/19/00 (2001) A 04/19/01 (2002) A 05/06/02

4/28/03 OFFICER/DIRECTOR DETAIL SCREEN 1:11 PM
CORP NUMBER: V16503 CORP NAME: AMERICAN CARPET MASTERS, INC.
TITLE: P NAME: BASSEM, WAHAB
323 N. BUENA VISTA
ORLANDO, FL 32835
TITLE: VP NAME: AHMAD, WAHA D.
4272 PINEBARK AVENUE
ORLANDO, FL

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----