2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 371007

ZITIS, DIANE

City-St-Zip: FT. LAUDERDALE, FL

13111 MUSTANG TRAIL

Name:

Address:

Entity Name: OLIALITY SANDRI ASTING INC

FILED Apr 15, 2002 8:00 AM Secretary of State

Entity Name: QUALITY SANDBLASTING, INC.							
Current Principal Place of Business:				New Principal Pla	New Principal Place of Business:		
	NSON STREE OOD, FL 3302						
Current Mailing Address:				New Mailing Addr	New Mailing Address:		
	69 STREET RDALE, FL 3:	3330 US	3				
FEI Number:	59-1390912	FEI Numb	er Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	Address of C	Current Re	gistered Agent:	Name and Addres	s of New Registered Agent:		
13111 MUS	OS, ANDREA STANG TRAIL RDALE, FL 3:		3	VELISARIOS, AND 13111 MUSTANG T FT LAUDERDALE,	TRAIL		
	named entity s e of Florida.	submits this	s statement for the p	ourpose of changing its registe	ered office or registered agent, or both,		
SIGNATUR	RE: ANDREA	VELISARI	os		04/15/2002		
	Electron	nic Signatur	e of Registered Age	ent	Date		
•	-	-	ntangible Tax filing req Contribution ().	uirement and elects to do so (X).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	T () ZITIS, DIANE, 13111 MUSTAN FT. LAUDERDA			Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	P () VELISARIOS, F 13111 MUSTAN FT. LAUDERDA	NG TRAIL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD () VELISARIOS, A 13111 MUSTAN FT. LAUDERDA	NG TRAIL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title:	S ()) Delete		Title:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ANDREA VELISARIOS V/P 04/15/2002