

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F26761

1. Entity Name

QUALITY INSTALLATIONS, INC.

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90035 036 ***150.00

Principal Place of Business

Mailing Address

C/O 801 WEST BAY DRIVE. #200
 LARGO FL 33770
 US

C/O 801 WEST BAY DRIVE. #200
 LARGO FL 33770
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2148551

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROIDA, JOEL D., ESQUIRE
 605 75TH AVENUE
 ST. PETERSBURG BEACH FL 33706

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PTD
 SONNENBERG, LAVERNE
 310 E. CENTRAL BLVD.
 CAPE CANAVERAL FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TD
 SONNENBERG LAVERNE
 10108 YACHT CLUB DR.
 TREASURE ISLAND, FL 33706 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SD
 SONNENBERG, MARY ANN
 310 E. CENTRAL BLVD.
 CAPE CANAVERAL FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PSD
 SONNENBERG MARY ANN
 10108 YACHT CLUB DR.
 TREASURE ISLAND, FL 33706 ☒ Change ☐ Addition

TITLE
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 CITY-ST-ZIP
☐ Delete

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☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

L.G. SONNENBERG
 L.G. SONNENBERG
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/28/00

727-364-1635

CR2E034 (9/99)