

**2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L16000139881

**Entity Name:** NEW QUALITY ENTERPRISE LLC

**Current Principal Place of Business:**

4822 SW 44TH CIR  
OCALA, FL 34474

**Current Mailing Address:**

P.O BOX 772346  
OCALA, FL 34477 US

**FEI Number:** 81-3621657

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

OCON, KELVIN J SR  
4822 SW 44TH CIR  
OCALA, FL 34474 US

*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:** KELVIN J OCON ALEMAN

02/18/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	OCON, KELVIN J SR	Name	MARTRINEZ, LEYLA J
Address	6411 SW 18ST	Address	4822 SW 44TH CIR
City-State-Zip:	MIRAMAR FL 33023	City-State-Zip:	OCALA FL 34474
Title	AUTHORIZED REPRESENTATIVE		
Name	CISNEROS, JOSE B		
Address	80 E 2ND ST		
City-State-Zip:	DEER PARK NY 11729		

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KELVIN J OCON ALEMAN

MGR

02/18/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date