## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

700 NW 107 AVE

14. I hereby certify that the information supplied with this thing doc indicated on this annual report of supplemental annual report of supplemental annual report officer or director of the court ation or the receiver or unstead Block 12 or Block 13 it sugged, or on an attached with an incident of the court of the c

MIAMI FL

STREET ADDRESS

CITY-ST-ZIP

FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Mar 02 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # QUALITY ROOF TRUSS COMPANY Principal Place of Business Mailing Address 700 NW 107 AVE 700 NW 107 AVE MIAMI FL 33172 MIAMI FL 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/27/1961 2. Principal Place of Business 2a. Maiting Address Applied For 59-0933031 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zφ This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes ☐ No 24 30 25 29 10. Name and Address of New Registere 9. Name and Address of Current Registered Agent 81 Name WATSKY, MORRIS J. 700 N.W.107TH AVE.,4TH FL. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33172 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE **BOLOTIN, IRVING** 12 NAME NAME 700 NW 107 AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition ELETE 2.1 TITLE TITLE Miller, Stuart A. COLE, ROBERT, B 2.2 NAME NAME 700 NW 107 AVE 2.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 00000 2. 4 C(TY-ST-ZIP CITY-ST-ZIP DELETE Сһапое Addition CD TITLE 3.1 TITLE MILLER, LEONARD NAME 3.2 NAME 700 NW 107 AVE 3.3 STREET ADDRESS STREET ADDRESS **MIAMI, FL 00000** CITY-ST-ZIF 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE PEKOR, ALLAN J NAME 4, 2 NAME 700 NW 107 AVE STREET ADDRESS 4.3 STREET ADDRESS MIAMI, FL 00000 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Malcolm, Waynewright 1700 N.W. 107 Ave SALEDA, M. E. 5.2 NAME NAME 700 NW 107 AVE STREET ADDRESS 5.3 STREET ADDRESS MIAMI,F L 00000 CITY-ST-ZIP 5.4 CITY-ST-ZIP Miami DELETE Change Addition TITLE 6.1 TITLE SIERRA, E. KATHLEEN 6.2 NAME NAME

6.3 STREET ADDRESS

posmot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address.

119198

229-640D

6.4 CITY-ST-ZIP