2002 UNIFORM BUSINESS REPORT (UBR)

May 19, 2002 8:00 am g Secretary of State DOCUMENT # 398684 1. Entity Name 05-19-2002 90188 006 ***150.00 QUALITY TOWER ERECTORS AND SERVICE, INC. Principal Place of Business Mailing Address 2280 10TH ST. S.E. 2280 10TH ST. S.E. LARGO FL 33771 LARGO FL 33771 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc.# Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1399502 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIAMOND, ROBERT F Street Address (P.O. Box Number is Not Acceptable) 2280 10TH STREET S.E. LARGO FL 33771 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DIAMOND, ROBERT F NAME STREET ADDRESS 13379 84TH TERRACE NORTH STREET ADDRESS CITY-ST-ZIP SEMINOLE FL 33776 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME DIAMOND, DOROTHY NAME STREET ADDRESS 7296 121ST WAY N. STREET ADDRESS CITY-ST-ZIP SEMINOLE FL 33776 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME DIAMOND, ROBERT F II NAME STREET ADDRESS STREET ADDRESS 8599 110TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

FILED