

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 13 1998 8:00am
Secretary of State

DOCUMENT # **414868**

(0)

1. Corporation Name

QUAIL ROOST NURSERY, INC.



Principal Place of Business

**15100 QUAIL ROOST DRIVE
RR 2
MIAMI FL 33187**

Mailing Address

**15100 QUAIL ROOST DRIVE
RR 2
MIAMI FL 33187**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/18/1972

4. FEI Number

59-1451107

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

**WEYRICK, KEITH S
15100 QUAIL ROOST DRIVE
MIAMI FL 33187**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

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

KEITH S. WEYRICK

(NOTE: Registered Agent signature required when reinstating)

DATE

7/13/98

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **WEYRICK, KEITH S**
STREET ADDRESS **14800 S.W. 200 ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **VP** ☐ DELETE
NAME **WEYRICK, DELORES H**
STREET ADDRESS **14800 S.W. 200 ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **T** ☐ DELETE
NAME **WEYRICK, KEITH S**
STREET ADDRESS **14800 S.W. 200 ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **S** ☐ DELETE
NAME **WEYRICK, DELORES H**
STREET ADDRESS **14800 S.W. 200 ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ DELETE
NAME **WEYRICK, H. A**
STREET ADDRESS **18420 CARIBBEAN BLVD.**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplementary annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

KEITH S. WEYRICK 7/13/98 (305) 238-5207

CR2E034 (5/98)



Phone: (305) 238-5202
Fax: (305) 251-4834

2

15100 Quail Roost Drive (S.W. 200 St.) • Miami, Florida 33187-9664

414868

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 1998 Annual Report #414868

July 7, 1998

Dear Secretary of State,

Please be advised that this report is being submitted with a \$150.00 filing fee due to the fact that the first notice was never received.

Your review of this matter, and withdrawal of late fees, will be greatly appreciated.

Sincerely,

Keith Weyrick
President