


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2007 08:00 AM
Secretary of State

DOCUMENT # 767669 1. Entity Name QUALITY PLAZA WAREHOUSE CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 5451 W 9TH CT HIALEAH, FL 33012	Mailing Address 5451 W 9TH CT HIALEAH, FL 33012
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DO NOT WRITE IN THIS SPACE



05072007 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VAZQUEZ, ADALBERTO
5451 W 9TH CT
HIALEAH, FL 33012

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VAZQUEZ, ADALBERTO 5451 W. 9TH CT HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS VASQUEZ, MILAGROS 5451 W. 9TH CT HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MALECKA, MICHAEL R 1655 W. 39TH PL HIALEAH, FL 33012
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05/30/07-80002-005 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Adalberto Vazquez **ADALBERTO VAZQUEZ** 5/7/07 305-558-5673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #