FILED
Jul 14, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G28026

1. Entity Name
QUALITY METAL FABRICATORS, INC.

Principal Place of Business	Mailing Address
2610 E 5TH AVE TAMPA, FL 33605 US	2610 E 5TH AVE TAMPA, FL 33605 US

DO NOT WRITE IN THIS SPACE

07032008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2264091
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Jones, Bruce Attorney at Law
16017 N. Florida, Ste# 125
Lutz, FL 33549

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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 [signature] U00000570244 07/14/06 00005 023 150.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	ROBERTS, EARL R.
STREET ADDRESS	2610 E 5TH AVE
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	V
NAME	BURGESS, JASON
STREET ADDRESS	2610 E 5TH AVE
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	S
NAME	TRAUTHWEIN, FRANCINE
STREET ADDRESS	2610 E 5TH AVE
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	V
NAME	ROBERTS, STEPHEN
STREET ADDRESS	2610 E 5TH AVE
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	P
NAME	ROBERTS JR, EARL R
STREET ADDRESS	2610 E. 5TH AVE.
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 607, 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: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTING OFFICER OR DIRECTOR Date Daytime Phone #