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FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # G32363 (5)
1. Corporation Name
QUALITY FLOORING SUPPLIES, INC.



Principal Place of Business Mailing Address
3630 ULMERTON ROAD 3630 ULMERTON ROAD
CLEARWATER FL 34622 33762 CLEARWATER FL 34622 33762

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/08/1983	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2300865	
24 Country		29 Country		5. Certificate of Status Desired	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent

JOHNSON, RALPH DALE
410 COURT ST NW
LARGO FL 34640

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 *Ralph Dale Johnson*
Signature, typed or printed name of registered agent and filed applicable

(NOTE: Registered Agent signature required when reinstating)

1-5-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	MANIS, HOWARD R.	1.2 NAME	
STREET ADDRESS	6081 BAHIA DEL MAR CIRCLE #151	1.3 STREET ADDRESS	
CITY-STATE-ZIP	ST. PETERSBURG FL	1.4 CITY-STATE-ZIP	
TITLE	DST	2.1 TITLE	
NAME	BLAIR, JASPER	2.2 NAME	
STREET ADDRESS	PO BOX 19410	2.3 STREET ADDRESS	
CITY-STATE-ZIP	LOUISVILLE KE	2.4 CITY-STATE-ZIP	
TITLE	VP	3.1 TITLE	
NAME	JOHNSON, RALPH DALE	3.2 NAME	
STREET ADDRESS	410 COURT ST NW	3.3 STREET ADDRESS	
CITY-STATE-ZIP	LARGO FL 34640	3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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 supplemental 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: *Ralph Dale Johnson*

DALE Johnson 1-5-98 813-572-6988

CR2E034 (10/97)