FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B, Morthem

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G38239

(1)

QUALITY INTERNATIONAL, INC.

FILED May 05 1997 8:00am Secretary of State

Suite, Apt. 6, etc.				<u> </u>	· •
2. Principal Place of Business 21. 4763 E. 11th Avenue 22. Suite, Apt. 4, etc. 23. Suite, Apt. 4, etc. 25. Suite, Apt. 4, etc. 27. Suite 28. Hialeah, FL 29. Ft. Lauderdale, FL 20. Country 20. Country 20. 3013 28. 28. 28. 38. 38. 38. 38. 38. 38. 38. 38. 38. 3	Principal Place of Business	Mailing Address	:		
2. Principial Place of Business 21 4763 E. 11th Avenue 28 P. O. Box 551535 59-2392762 100 Apple 20 Suite, Apt. 6, etc. 277 50. Box 551535 59-2392762 100 Apple 20 Suite, Apt. 6, etc. 277 50. Box 551535 59-2392762 100 Apple 20 City & States 22 Ft. Lauderdale, FI. 71 71 71 71 71 71 71 71 71 71					
2. Principial Place of Business 21 4763 E. 11th Avenue 28 P. O. Box 551535 59-2392762 100 Apple 20 Suite, Apt. 6, etc. 277 50. Box 551535 59-2392762 100 Apple 20 Suite, Apt. 6, etc. 277 50. Box 551535 59-2392762 100 Apple 20 City & States 22 Ft. Lauderdale, FI. 71 71 71 71 71 71 71 71 71 71	•		:		
2 Principal Place of Bounness 2 An Anglor Address 2 An Anglor Age of 2 11th Avenue 3 Anglor Age of 2 11th Avenue 3 P. P. O. Box 551535 4 FEI Number 59-2392762 50ths, Apt. 6, etc. 27 50ths, Apt. 6, etc. 28 50ths, Apt. 6, etc. 29 11 Hailesh, FL 20 County 20 21 A 33013 28 28 29 20 20 County 20 20 20 20 20 20 20 20 20 20 20 20 20			•	3. Date incorporated or Qualified	Se. Date of Last Report
221 4 7 6 3 E. 11th Avenue 28 P. O. Box 551535 59-2392762 Readed Reading State April 6 acc. 27 State 28 Hialeah, Fi. 28 Ft. Lauderdale, Fi. 39 Ft. Lauderdale, Fi. 30 Ft. Name and Address of Current Registered Agent 51 Ft. Name and Address of Current Registered Agent 51 Ft. Name and Address of Perry Registered Agent 51 Ft. Name and Address					í í
Suite, Apt 8, etc. Suite, Apt 8, etc. Suite, A	— · · · · · · · · · · · · · · · · · · ·	L-m-			Applied For
City & State 22 Hialesh, FL 28 Ft. Lauderdale, FL 5.6 Section Campaign Planning 25.00 May 29 7t. Lauderdale, FL 20 Touting Contribution Addy to Piece 20 20 20 20 20 20 20 2			535	59-2392762	Not Applicable
### PL 28 Ft . Lauderdale, FL Tour Fund Contribution Addition of Piece Addit	2	27	:	5. Certificate of Status Desired	\$8.75 Additional Fee Required
20 3 3 0 1 3 28 20 3 3 3 5 5 7 5 20 20 20 20 20 20 20 20 20 20 20 20 20	Lane		:		\$5.00 May Be
24 3 3 3 0 1 3 28 29 3 3 3 5 5 15 3 5 90 Portice Statutes					Added to Fees
81 Name and Address of Current Registered Agent 82 Street Agencies (P.O. Box humber is Not Acceptable) 42 (P.O. Box humber is Not Acceptable) 42 (P.O. Box humber is Not Acceptable) 43 (P.O. Box humber is Not Acceptable) 44 (P.O. B. IIII have nue 83 (P.O. Box humber is Not Acceptable) 44 (P.O. Box humber is Not Acceptable is Not Acceptable is Not Acceptable in Registration's Box humber is Not Acceptable is Not Acceptable in Registration's Box humber is Not Acceptable in Registration's Box humber is Not Acceptable is Not Acceptable in Registration's Box humber is Not Acceptable in Registration's Box	L ' '		itry	8. This corporation has liability for i	ntangible tax under s. 199.032,
ST Name Street Address Part of d J Hochfelsen Street Address Part of d Part of	24 33013 25		· · · · · · · · · · · · · · · · · · ·		
Site Address (P.O. Box Number is Not Acceptable)	g, traine and repaired of our last		81 Name	10. 10010 010 -00100 01100 10.	Portugue Sparit
SIGNATURE			Jerro	ld J. Hochfelsen	
SIGNATURE		· [7	82 Street Addre	ess (P.O. Box Number is Not Acceptab	()
11. Pursuant to the provisions of Sections 607.0502 and 807.1508, Florida Statutes, the above-harned comprision auchilia this statement for the purpose of changing its replications of registered agent, for both, in the State of Figlida. Such change was authorized by the composition's board of directors. I hereby accept the approximant as regist of Section 907.0505, Florida Statutes. SIGNATURE Signal in page or prime name of ingified spike of Section 907.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS TITLE DP	•	 -		E. lith Avenue	· · · · · · · · · · · · · · · · · · ·
11. Pursuant to the provisors of Sections 607.0502-664 907.1506. Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its repide office or registered agent of the state of Fightal. Such or page was authorized by the corporation's board of directors. I hereby accept the appointment as registed agent. I am familiar vigit', and agent the obligations of. Section 907.0505. Florida Statutes. SIGNATURE Symmle upon or present agent and see a spotophia. OFFICERS AND DIRECTORS. 12. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE DP MAKE Jerrold J. Hochfelsen 12. MAKE STREET ADDRESS 1061 S. W. 93rd Avenue 13. STREET ADDRESS CITY-ST-2P TITLE DELETE 1. TITLE		1	~		
11. Pursuant to the provision of Sections 607.0502-664 907.1506. Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its register of spenial by the register of spenial by the statement of the State of Pipidia. Such night of Section 907.0505. Plorida Statutes. SIGNATURE Signature Signature Signature Signature Signature Signature DP Signature Signatur		<u> </u> 7	84 City		peg 85 Zip Code
SIGNATURE Suprantial rysed or primed name of recognized again than a secongles) 12. OFFICERS AND DIRECTORS 13. ADDITIONS.CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE DP			Hiale	eah,	
SIGNATURE Suprantia hypeo or primor name of recogniting again and the si sociologies) 12. OFFICERS AND DIRECTORS 13. ADDITIONS.CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE DP MAME Jerrold J. Hochfelsen 1.2 MAME STREET ADDRESS CITY-ST-ZP TITLE DELETE STRING STREET ADDRESS STRING STREET	office or registered agent/or both, in the State	∕and 907.1500, Florida Statutes, the ab of Florida. Such chance was authorized	ove-named corp by the corporati	oration automits this statement for the p on's board of directors. I hereby acced	urpose of changing its registered it the appointment as registered
STREET ADDRESS TITLE MAME STREET ADDRESS TIT	agent. I am familiar with, and agent the obliga	tions of Section 907.0505, Florida Statu	nes.	/ 24	4 = 14>
TILE DP DOELTE UNTILE DOELTE DOELTE UNTILE DOELTE DOELTE DOELTE UNTILE DOELTE DOEL					125/91
TITLE DP			Agent Higherine moulin		DATE
MAME Jerrold J. Hochfelsen STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS STREET A			E	ADDITIONS/CHANGES TO OFFIC	
STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS STREET ADDRES	<u>-</u>	4	· ·		C CHECK C ADDROIS
CITY-ST-ZP Plantation, FL 33324 TITLE MAME STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS SA STREET AD			···		
TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZEP TITLE DELETE 4.1 TITLE AMME 4.2 NAME STREET ADDRESS CITY-ST-ZEP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZEP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZEP TITLE DELETE 5.4 CITY-ST-ZEP TITLE DELETE 5.4 CITY-ST-ZEP SA-CITY-ST-ZEP SA-CITY-ST-ZEP SA-CITY-ST-ZEP SA-CITY-ST-ZEP SA-CITY-ST-ZEP					
NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE S.1 TITLE AL CITY-ST-ZP TITLE DELETE AL CITY-ST-ZP TITLE AL CITY-ST-ZP TITLE DELETE AL STREET ADDRESS CITY-ST-ZP TITLE DELETE AL STREET ADDRESS CITY-ST-ZP TITLE DELETE AL STREET ADDRESS CITY-ST-ZP TITLE DELETE S.1 TITLE S.2 NAME STREET ADDRESS CITY-ST-ZP TITLE S.3 STREET ADDRESS CITY-ST-ZP TITLE S.4 STREET ADDRESS CITY-ST-ZP S.5 STREET ADDRESS S.5 STREET					Change Addition
STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS CITY-ST-ZP TITLE DELETE 3.1 TITLE 3.2 MAME 3.2 MAME 3.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 5TREET ADDRESS CITY-ST-ZP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 4.4 CITY-ST-ZP TITLE DELETE 5.1 TITLE NAME 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 STREET ADDRESS 5.4 STREET ADDRESS 5.5 STREET ADDRESS 5.5 STREET ADDRESS 5.5 STREET ADDRESS 5.6 STREET ADDRESS 5.7 STREET ADDRESS 5.7 STREET ADDRESS 5.8 STREET ADDRESS 5.9 SACTIY-ST-ZP 5.9 SACTIY-ST-ZP 5.9 SACTIY-ST-ZP			··· .		The saids in the support
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME AL CITY-ST-ZIP TITLE DELETE A.1 TITLE A.2 NAME A.2 NAME A.2 NAME A.2 NAME A.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE A.1 TITLE A.2 NAME A.2 NAME A.2 NAME A.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE S.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE A.4 CITY-ST-ZIP A.4 CITY-ST-ZIP S.5 NAME STREET ADDRESS S.5 STREET ADDRESS S.			··-		
TITLE NAME STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP TITLE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME STREET ADDRESS CITY-ST-ZPP TITLE DELETE 4.1 TITLE AAME 5.1 TITLE S.1 TITLE AAME 4.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZPP SACITY-ST-ZPP SACITY-ST-ZPP SACITY-ST-ZPP	***************************************				
NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE A1 TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE A2 STREET ADDRESS CITY-ST-ZP TITLE DELETE A4 CITY-ST-ZP TITLE S2 NAME S3 STREET ADDRESS CITY-ST-ZP TITLE S3 STREET ADDRESS S3 STREET ADDRESS S4 CITY-ST-ZP S5 NAME S5					Change Addition
STREET ADDRESS CITY-ST-ZP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 5TREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS SA STREET ADDRESS SA CITY-ST-ZIP SA CITY-ST-ZIP	···-		· 1		Charle Chyonou
CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 5.1 TITLE SA STREET ADDRESS SA CITY-ST-ZPP SA CITY-ST-ZPP	}	*****	·	and the second	
TITLE NAME A 2 NAME 4.2 NAME 4.2 NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZP SA STREET ADDRESS					
NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE S.1 TITLE S.2 NAME STREET ADDRESS CITY-ST-ZP S.4 CITY-ST-ZP S.4 CITY-ST-ZP S.4 CITY-ST-ZP S.4 CITY-ST-ZP					I Change I Addition
STREET ADDRESS CITY-ST-ZIP TITLE DELETE S.1 TITLE S.2 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP			·- ']	•	Change Addition
CITY-ST-ZIP TITLE DELETE \$1 TITLE A4 CITY-ST-ZIP S1 TITLE \$2 NAME \$2 NAME \$3 NAME \$4 CITY-ST-ZIP \$4 CITY-ST-ZIP \$5 NAME \$4 CITY-ST-ZIP \$5 NAME \$5 NAME					
TITLE NAME STREET ADDRESS CITY-ST-ZP SA CITY-ST-ZP CHANGE S.1 TITLE S.2 NAME S.2 NAME S.3 STREET ADDRESS S.4 CITY-ST-ZP S.4 CITY-ST-ZP				,	1 1
NAME STREET ADDRESS CITY-ST-ZP SA CITY-ST-ZP SA CITY-ST-ZP	· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS CITY-ST-ZP SA CITY-ST-ZP		_			Change Z Addition
CITY-ST-ZP SACITY-ST-ZP	I			1.20	14 51660
	···			•	H) 1/1/14
INILE LI DELETE 6.1 TITLE				·	
			1	70000215	Addition Addition
NAME		5.2 MA	Æ	-05/07/970102	6030
***1EC OU	l i	B.3 STR	EET ADOMESS	***165 UU	
CITY-ST-ZP 64 CITY-ST-ZP 64 CITY-ST-ZP 64 CITY-ST-ZP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3VI). Florida Statutes, I further pertify that the					

information indicated on this annual report or supplemental at 1 am an officer or director of the corporation or the receiver or appears in Block 12 or Block 13 if changed, or on an attachm ist report is true and accurate and that my signature shall have the same legal effect as if made under oath; that istee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name

(954) 424-6137