2004 FOR MROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jan 29, 2004 8:00 am Secretary of State DOCUMENT # K03171 01-29-2004 90102 026 ***150 00 1. Entity Name QUALK HOMES, INC. Principal Place of Business Mailing Address 54001524 1576 FAN PALM ROAD 1576 FAN PALM ROAD BOCA RATON, FL 33432 US BOCA RATON, FL 33432 US 3. Mailing Address SAME 2. Principal Place of Business 280 Royal Palm Way Suite, Apt. #, etc Suite, Apt. #, etc. 01172004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For Boca Raton, FL 33432 65-0014619 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Qualk, Ronald L. QUALK, RONALD L. Street Address (P.O. Box Number is Not Acceptable) 280 Royal Palm Way 1576 FAN PALM RD BOCA RATON, FL 33432 Boca Raton, BFL 33432 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete Addition TITLE TITLE ▼ Change QUALK, RONALD L. NAME NAME STREET ADDRESS 1576 FAN PALM ROAD STREET ADDRESS 280 Royal Palm Way Boca Raton, FL 3 CITY-ST-ZIP CITY-ST-7IP BOCA RATON, FL 33432 Delete X Change TITLE ☐ Addition NAME QUALK, BROOKE R. NAME 280 Royal Palm Way STREET ADDRESS STREET ADDRESS 1576 FAN PALM ROAD CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP Boca Raton, FL 33432 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-2IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP · 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 path; that I am an officer or director of the corporation or the receiver or trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or tru changed, or on an attachment with an

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