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FILED
May 06 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 # L30151 (9)
1. Corporation Name
QUALITY PROPERTIES AND SERVICES, INC.



Principal Place of Business
8005 CHIANTI DR.
ORLANDO FL 32836
US

Mailing Address
8005 CHIANTI DR.
ORLANDO FL 32836
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 13905 W. COLONIAL DR.		26 8879 W. COLONIAL DR #233		11/16/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 #250		27 #233		59-2977446	
City & State		City & State		Applied For	
23 WINTER GARDEN, FL		28 OCOCHEE, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 34787		29 34761		30 ORANGE	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
25 ORANGE		30 ORANGE		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
PETERS, MARTHA DOREEN 8005 CHIANTI DRIVE ORLANDO FL 32836				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83 8879 W. COLONIAL DR. #233	
				84 13905 W. COLONIAL DR. #250, WINTER GARDEN	
				85 City	
				OCOCHEE	
				86 Zip Code	
				FL 34787	

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 Martha Doreen Peters (407-925-2533) DATE 4/27/98

(Signature, typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	SMITH, SHANNON O	1.2 NAME	SMITH, SHANNON O.
STREET ADDRESS	2627 YUCCA ST.	1.3 STREET ADDRESS	2925 KRISTA KEY CIRCLE
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FL 32817
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 unchanged, or on an attachment with an address.

SIGNATURE: Martha Doreen Peters 4/27/98 407-925-2533

CR2E034 (10/97)