FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY 23 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L88988 (5)

1. Corporation Name
ALL FIRST QUALITY, INC.

Principal Place of Business:
10250 WOODBERRY ROAD
P.O. BOX 2850
BRANDON FL 33509-2850

Mailing Address:
10250 WOODBERRY ROAD
P.O. BOX 2850
BRANDON FL 33509-2650

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/23/1990
3a. Date of Last Report: 04/18/1994
4. FEI Number: 59-3020482 — Applied For / Not Applicable

2. Principal Place of Business — 21 / 22 Suite, Apt. # etc. / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address — 26 / 27 Suite, Apt. # etc. / 28 City & State / 29 Zip / 30 Country

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

HOLMES, JOHN W
10250 WOODBERRY ROAD
TAMPA FL 33619

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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	HOLMES, JOHN W
STREET ADDRESS	2211 CHEROKEE TRAIL
CITY-ST-ZIP	VALRICO FL
TITLE	V
NAME	HOLMES, SUSAN M
STREET ADDRESS	2211 CHEROKEE TRAIL
CITY-ST-ZIP	VALRICO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

2 TITLE	DELETE — [X] Change [ ] Addition
2 NAME	HOLMES, SUSAN M.
2 STREET ADDRESS	2211 CHEROKEE TR
2 CITY-ST-ZIP	VALRICO, FL 33594

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Paul Holmes Pres. & John W. Holmes 5/16/95 813-654-4080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0285842 CP

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10: 15

OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L89065** (1)

1. Current Name
QUINTEN & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
3764 NORTHEAST 70TH AVE SILVER SPRINGS FL 34488 US	3764 NORTHEAST 70TH AVE SILVER SPRINGS FL 34488 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
07/25/1990	02/02/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Date Apt # or Bldg	Date Apt # or Bldg
22	27
City & State	City & State
23	28

4. FEI Number	Applied For
59-3025107	Not Applicable

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

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

24	25	29	30

8. The corporation has liability for intangible tax under s. 199 D&V, Florida Statutes. ☒ Yes. ☐ No.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TAYLOR, WILLIAM, I 3764 NORTHEAST 70TH AVE SILVER SPRINGS FL 34488	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 Section 607.325, and/or 608.4104, 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. The 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 607.325, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR DATA		13. ADDITIONS, CHANGES TO OFFICER AND/OR DIRECTOR DATA	
Title	PTD	Title	☐ Change ☐ Addition
Name	TAYLOR, WILLIAM I.	Name	
Street Address	3764 NE 70TH AVENUE	Street Address	
City-State-Zip	SILVER SPRINGS FL	City-State-Zip	
Title	VSD	Title	☐ Change ☐ Addition
Name	TAYLOR, STELLA M.	Name	
Street Address	3764 NE 70TH AVENUE	Street Address	
City-State-Zip	SILVER SPRINGS FL	City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	

14. I hereby certify that the information supplied with this filing is accurately transcribed and 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 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 above, or on an attachment with an additional.

SIGNATURE: William Taylor 5-18-95 (904)236-5581
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0384110 CF