## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** May 03, 2004 08:00 AN Secretary of State

| DOCUMENT # P00000107  1. Entity Name QUALITY AUTO TINT, INC.       | 7068   |  |
|--|--|--|
| Principal Place of Business<br>13935 NW 1ST AVE<br>MIAMI, FL 33168 | Mailing Address<br>13935 NW 1ST AVE<br>MIAMI, FL 33168 |  |

| 13935 NW 1ST AVE   | Mailing Address 13935 NW 1ST AVE MIAMI, FL 33168  N THIS SPACE | CE                         | 04262004  4. FEI Numbe 65-105 | 3415 Not Applicable   |
|--|--|----------------------------|-------------------------------|---|
|  | <u> </u>   | 41 ME 11 H.                | 5. Certificate                | of Status Desired   \$8.75 Additional Fee Required          |
| 6. Name and Address of Current Reg<br>PEREZ, BEHAR & ASSOCIATES, PA<br>13935 NW 1ST AVE<br>MIAMI, FL 33168   | istered Agent  |                            |                               | NOT WRITE<br>THIS SPACE                                     |
| <ol> <li>The above named entity submits this statement for the<br/>the obligations of registered agent.</li> </ol>   | purpose of changing its registere                              | ed office or register      | red agent, or bo              | th, in the State of Florida, I am familiar with, and accept |
| SIGNATURE Signature, typed or privided name of registered again and it   | te if applicable. (NOTE Bagistere                              | nd Agent someture required | d when reinstating)           | はあるシンギで、業は、「Tibe XTTD」。<br>DATE ・ 中央                        |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2004 Fee will be \$550.00  | 9. Election Campaign Finar Trust Fund Contribution.            |                            | .00 May Be<br>led to Fees     | U00000152111<br>05/04/04-80074-001 150.00                   |
| TITLE NAME CHAVARRIA, SERGIO R STREET ADDRESS CITY-SI-ZIP N MIAMI, FL 33161  TITLE NAME STREET ADDRESS CITY-SI-ZIP |  |                            |                               | NOT WRITE<br>THIS SPACE                                     |

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal enect as it hade unper our that it am an officer of director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.