FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2004 FILE

DOCUMENT # P01000090398

Quality Marketine of Miani Corp



04 JAN 26 AH 10: 46

SECRETARY OF STATE TALL AHASSEE FLORIDA-

DO NOT WRITE IN THIS SPACE

	JO NOT THATE									
2. Principal Pl	ace of Business NW 6657	3. Mailing Address S A	ame.	DEMASTALLINENT 03-04						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	***************************************	DO NOT WRITE IN THIS SPACE						
SUITE #5		City & State		4. FEI Number Applied For						
City & State	11, +6	July d Clair		65 - 1/384/7 Not Applicable						
2io 3 (3166 Country Zip		Country	5. Certificate of Status Desired \$8.75 Additional Fee Required						
				7. Name and Address of Current Registered Agent						
			Name K	Name RAYSA RUIZ						
DO NOT WRITE			Street Address (P.O. Box Number is Not Acceptable)							
IN THIS SPACE			860 W 53 TERRACE							
4 1000 000		AOL .								
111111111111111111111111111111111111111			City 141	aleah FL Zio Code 33012						
		the purpose of changing its r	agistered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accep						
the obligati	ons of registered agent.			. / /						
SIGNATURE	~ <i>(V)</i>			1/13/04						
	Sprafts yood provided name of registered agent a nuarry 1 - May 1 Face is \$150,00	nd title if applicable. (NOTE:	Registered Agent signature requ	ured when renefitting) DATE						
	After May 1, Fee is \$550,00			Election Campaign Financing \$5.00 May Be						
Make Check	Amended UBR is \$61.25 Payable to Florida Department of	State		Trust Fund Contribution, Added to Fees						
10.	OFFICERS AND	00000000000 04								
TITLE	P-T-D		TITLE							
NAME STREET ADDRESS	RAYSA RUIZ 860 W 53 TERRAC	E	NAME CONTRACTOR							
STREET ADDRESS CITY-ST-ZIP	HIALCAH / FL 3	3012	STREET ADDRESS							
TITLE	√₽- S- ¼	JU1 2	11TLE							
NAME	IN A DAMIREZ	0	WATE	800027623108 01/26/0401093008 **300.00						
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CITY-ST-ZIP	certify that the information expended with	this filing does set qualify for	Crity-ST-ZP	n Saction 119 07/3Vi) Elevina Statutes I hutbor earlier that the information						
12. Thereby 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 report or suppliemental report is true and facture and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the controlling of the receiver of the r										
of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.										

FOR PROFIT CORPORATION 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO1000090398 1. ENTITY MARKETING OF MIAMI GAP											
I	OO NOT WRITE	IN THIS SI	PAC	E							
2. Principal Pla 8390 Suite, Apt. I	1 N (V 6651 Suite, Apt. #. etc.			ine.		DO NOT WRITE IN THIS SPA	CE ·				
SUITE City & State MIAI	1 #5 11 , FL	City & State			4. FE	65-1138417	Applied For Not Applicable				
^{Zin} 331	66 Country	Zip Country			5. Ce	5. Certificate of Status Desired \$8.75 Additional Fee Required Name and Address of Current Registered Agent					
	RITE		Name RAYSA RUIZ Street Address (P.O. Box Number is Not Acceptable) SGO W 53 TERRACE								
	IN THIS SPA			4	iale.	·	Zip Code 330/2				
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											
Sgristuré. Freed Trined name of registered agent and little if applicable. (NOTE: Registered Agent signature required January 1 - May 1: Fee 1s \$150.00 After May 1, Fee 1s \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be . Added to Fees				
CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D P-T-D RAYSA RUIZ 860 W 53 TERRAC HIALLAH , FL 3. VP-S-D JULIO RAMIREZ JULIO RAMIREZ 860 W 53 TERRAC	E 3012 2	CITY TITY NAMES STR	AE EET ADDRESS Y-ST-ZIP E AT EET ADDRESS			CRZESISAR (18:02)				
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CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP			III NA SIJ								
12. 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 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 10 or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #											

QUALITY MARKETING OF MIAMI CORP.

8399 N.W. 66 ST Suite # 5 MIAMI- FLORIDA-33166 PHONE (786) 355-2683

JANUARY 13, 2004

DEPARTMENT OF STATE

REF: DOCUMENT # P01000090398

AS PER OUR PHONE CONVERSATION HERE IS MY CHECK # 1173 FOR THE AMOUNT OF 300.00 AS PAYMENT OF THE 2003 AND 2004 UBR.

PLEASE ACCEPT MY PAYMENT AND LATENESS.

THANKS FOR YOUR HELP.

ATTE.

RAYSA RUIZ PRESIDENT

NOTE: PLEASE UPDATE YOUR INFORMATION WITH MY NEW ADDRESS.