

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

|                                                                                                |                                                                                   |
|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # P01000098639</b><br>1. Entity Name<br><b>QUALITY MASTER'S CONSTRUCTION, INC.</b> |  |
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|                                                                              |                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------|
| Principal Place of Business<br><b>8511 NW 8 ST, #411<br/>MIAMI, FL 33126</b> | Mailing Address<br><b>8511 NW 8 ST, #411<br/>MIAMI, FL 33126</b> |
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04242007 No Chg-P CR2E034 (11/05)

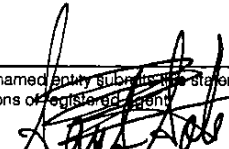
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| 4. FEI Number<br><b>65-1142358</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

|                                                           |                                           |
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| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75 Additional<br/>Fee Required</b> |
|-----------------------------------------------------------|-------------------------------------------|

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| 6. Name and Address of Current Registered Agent<br><br><b>ANTONIO SOTO, SANTOS<br/>8511 NW 8 ST, #411<br/>MIAMI, FL 33126</b> |
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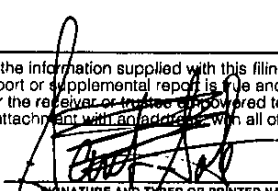
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| 8. The above named entity subscribes to the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. |
| SIGNATURE:  DATE: <b>4-24-07</b>                                                                                                                 |
| <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>                                                                            |

|                                                                               |                                                                                                                            |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
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| 10. OFFICERS AND DIRECTORS                     |                                                                       |
|------------------------------------------------|-----------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>ANTONIO SOTO, SANTOS<br>8511 NW 8 ST, #411<br>MIAMI, FL 33126   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>SANTIAGO, GONZALEZ JR<br>17356 SW 282 ST<br>HOMESTEAD, FL 33030 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>HERNANDEZ, ERNIE<br>18761 SW 297 ST<br>HOMESTEAD, FL 33033      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>JOHNSTON, KEITH L<br>4201 SW 33 ST<br>HOLLYWOOD, FL 33023       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |

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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address with all other like empowered. |
| SIGNATURE:  DATE: <b>4-24-07</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |