## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000116411

City-St-Zip:

Entity Name: HS QUALITY KITCHEN & BATH SYSTEMS, INC.

FILED Jan 15, 2004 Secretary of State

		CELL TO THE TELL OF BY THE OFFICE	_IVIO, II VO.			
Current Principal Place of Business:  13913 BITTERSWEET WAY TAMPA, FL 33625  Current Mailing Address:			New Princ	New Principal Place of Business:  6710 BENJAMIN RD. SUITE 300 TAMPA, FL 33634  New Mailing Address:		
			SUITE 300			
			New Maili			
13913 BIT <sup>*</sup> TAMPA, F	TERSWEET L 33625	WAY	6710 BEN. SUITE 300 TAMPA, F			
FEI Number	: 74-3024575	FEI Number Applied For ( )	FEI Number Not App	olicable ( ) Certificate of Status Desired ( )	ı	
Name and	d Address of	Current Registered Agent:	Name and	d Address of New Registered Agent:		
HUCKABY 13913 BIT TAMPA, F	/, WILLIAM L TERSWEET L 33625	WAY				
	e named entity e of Florida.	$ ho$ submits this statement for the ${\mathfrak p}$	ourpose of changing i	its registered office or registered agent, or b	oth,	
SIGNATU	RE:					
	Electro	onic Signature of Registered Ago	ent	Date		
Election Car	mpaign Financi	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip: Title: Name:	HUCKBAY, W 13913 BITTE TAMPA, FL 3	RSWEET WAY 33625 ( ) Delete	Title: Name: Address: City-St-Zip: Title: Name:	P (X) Change ( ) Addition HYATT, CHRISTOPHER L 5314 SOUTH RUSSELL STREET TAMPA, FL 33611  ( ) Change ( ) Addition		
Address: City-St-Zip:	4010 BRAES TAMPA, FL 3		Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	(	( ) Delete	Title: Name: Address: City-St-Zip:	T ( ) Change (X) Addition MAITRE, JEFFREY A 3429 STEEPLECHASE ROAD WESLEY CHAPEL, FL 33543		
Title: Name: Address:	(	) Delete	Title: Name: Address:	S ( ) Change (X) Addition HUCKABY, WILLIAM L 13913 BITTERSWEET WAY		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip: TAMPA, FL 33625

SIGNATURE: CHRISTOPHER HYATT P 01/15/2004