## **2004 FOR PROFIT CORPORATION** ANNUAL REPORT ....

## May 04, 2004 8:00 am Secretary of State **DOCUMENT # P02000087062** 05-04-2004 90171 044 \*\*\*150.00 QUALITY DECK & FRAMING, INC. Principal Place of Business Mailing Address 9000 RED GOLD LANE 9000 RED GOLD LANE ORLANDO, FL 32818 ORLANDO, FL 32818 No Chg-P 04202004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2371806 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEHARRY, NORMA YOUGRAJ DO NOT WRITE 9000 RED GOLD LANE ORLANDO, FL 32818 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS BEHARRY YOU GRAT NAME STREET ADDRESS 9000 RED GOLD LN ORLANDO FL 32818 CJTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

**FILED**