2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132699

City-St-Zip:

Entity Name: SPECIAL QUALITY MAINTENANCE CORP

FILED Jan 16, 2004 Secretary of State

| Littly Nan | ile. SPECIAL | QOALITT MAINTEN | ANCE, CORF. | | | | | |
|---|-------------------------|---------------------------------------|---|--|-----------------|---------------|-------------------|---------------|
| Current Principal Place of Business: | | | | New Principal Place of Busines | | | | |
| 11200 NW MEDLEY, F | SO. RIVER D FL 33166 | PRIVE JS | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | | |
| 11200 NW MEDLEY, F | SO. RIVER D FL 33166 | DRIVE JS | | | | | | |
| FEI Number: | 04-3667897 | FEI Number Applied I | For () FEI | Number Not App | licable () | Certific | cate of Status De | esired () |
| Name and | Address of | Name and | Name and Address of New Registered Agent: | | | | | |
| PITA, RAFA 11200 NW MEDLEY, F | SO. RIVER D | DRIVE JS | | | | | | |
| The above in the State | | submits this statemer | nt for the purpos | se of changing | its registe | red office or | registered age | ent, or both, |
| SIGNATUR | RE: | | | | | | | |
| | Electro | nic Signature of Regis | tered Agent | | | | Date | |
| Election Can | npaign Financir | g Trust Fund Contributio | on (). | | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | | |
| Title: Name: Address: City-St-Zip: | PITA, RAFAEL |) Delete . RIVER DRIVE 33166 US | | Title: Name: Address: City-St-Zip: | | ()Change | () Addition | |
| Title: Name: | (|) Delete | | Title: Name: | VP PITA, JOI | RGÈ Ĺ | (X) Addition | |

City-St-Zip: MIAMI, FL 33155

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.

SIGNATURE: RAFAEL PITA P 01/16/2004