FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P9200004732 (3)
1. Corporation Name

HYER QUALITY BUILDERS, INC.



Principal Place of Business 1510 NE 33RD COURT POMPANO BEACH FL 33064

1510 NE 33RD COURT POMPANO BEACH FL 33064

Mailing Address

					3. Date Incorporated or Qualified 11/10/1992 3a. Date	of Last Report 06/22/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0369886	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Ζφ 24	Country 25	7(p)	Country 30	7	8. This corporation has liability for intangible tale. Florida Statutes Yes X No	x under s 199.032,	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
HYER, WILLIAM D				Name Street Add	Name Street Address (P.O. Box Number is Not Acceptable)		
1510 N.E. 33RD COURT			Ľ.	82 Street Address (P.O. Box Number is Not Acceptable)			
POMPANP BEACH FL 33064			83				
			84	City	FL	85 Zip Code	
or register familiar wit	a the provisions of Sections 607.050 ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	rida. Such change was authorize	ed by the corp	named corpo oration's boa	oration submits this statement for the purpose of cha ard of directors. I hereby accept the appointment as	nging its registered office registered agent. I am	
SIGNATURE .	Signature, typical or profeed name of registered ages	nt and little if applicable (NO	TE Registered Age	nt signature requir	red when reinstating) DATE		
12.	OFFICERS AF	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TI LE	D	□ DELETE	1. 1 TITLE			Change Addition	
NAME	HYER, WILLIAM D		1.2 NAME				
STREET ADDRESS	DOMBANO DEACH EL 20024			ADDRESS			
011Y-8*-719 111LE	T DELETE			ST - ZIP		7.05	
NAME	מננדונ		2 1 TITLE 22 NAME		L	Change	
STREET ADDRESS	rece			+ODDCCC			
CITY - ST - ZIP	5		2.3 STREET ADDRESS 2.4 CHY+ST-ZIP				
11111	T DELETE		3 1 TITLE	SI · ZIP	Г	Change Addition	
NAME			3.2 NAME		L.	_ Notitoli	
STREET ADDRESS			33 SIREE	T ADDRESS			
City-St-ZiP			3.4 CITY-5				
THE		☐ DELFTE	4) TITLE			Change Addition	
NAME			4 2 NAME		_	-	
STREET ADDRESS			4 3 STREE	ADDRESS			
CHY-\$1-ZiP			4.4 CITY - S	SI-ZIP			
1016	☐ DELETE		5 1 TITLE			Change Addition	
NAME			5.2 NAME	1			
STREET ADDRESS			5 3 STREE	ADDRESS			
City - \$1 - 2in			5 4 City - 5	ST - ZIP			
TITLE		DELETE	6 1 TITLE			Change Addition	
NAME			6 2 NAME				
SYREET ADDRESS			6.3 STREET	ADDRESS			
CIFY - ST - ZiP			6.4 CITY-5	5T - ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, 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 12 or Block 13 if chapted, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/96 Daytine Prone /