## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000039887

Title:

Title:

Name: Address:

City-St-Zip:

Name:

Address: City-St-Zip: (X) Delete

8234 LAKE PARK ESTATES BLVD.

(X) Delete

SEETARAM, PAMELA N

ORLANDO, FL 32818

SAMAROO, DIÁNE N

7817 HYACINTH DRIVE

ORLANDO, FL 32835

Entity Name: FLORIDA QUALITY HOMES AND INVESTMENTS, INC.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1439 PINE ORLANDO	HILLS ROAD , FL 32808						
Current Mailing Address:			New Maili	New Mailing Address:			
1439 PINE ORLANDO	HILLS ROAD , FL 32808						
FEI Number:	59-3218456	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
RAMBRICH, DANRAJH 9068 PINNACLE CIRCLE WINDERMERE, FL 34786 US			1439 PINE	SEETARAM, PAMELA 1439 PINE HILLS ROAD ORLANDO, FL 32808 US			
The above in the State		bmits this statement for the pu	rpose of changing	its registered o	office or registered agent, or both,		
SIGNATURE: PAMELA SEETARAM				04/14/2008			
	Electronic	Signature of Registered Agen	t		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP () C RAMBRICH, DAN 9068 PINNACLE WINDERMERE, F	CIRCLE	Title: Name: Address: City-St-Zip:	P (X SEETARAM, P 1439 PINE HIL ORLANDO, FL	LS ROAD		
Title: Name: Address: City-St-Zip:	DST () C RAMBRICH, SEN 9068 PINNACLE WINDERMERE, F	CIRCLE	Title: Name: Address: City-St-Zip:	VP (X SAMAROO, DIA 1439 PINE HIL ORLANDO, FL	LS ROAD		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: PAMELA SEETARAM P 04/14/2008

() Change () Addition

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