


FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90126 009 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000052214

1. Corporation Name

H.P. QUALITY INSTALLATIONS, INC.

HP DESIGN, INC.

Principal Place of Business

 1855 GRIFFIN RD
 A-376
 DANIA FL 33004
 US

Mailing Address

 1855 GRIFFIN RD
 A-376
 DANIA FL 33004
 US


DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/26/1993

4. FEI Number

65-0424910

Applied For

Not Applicable

5. Certificate of Status Desired ☐
 \$8.75 Additional
 Fee Required
6. Election Campaign Financing ☐
 \$5.00 May Be
 Added to Fees.

 8. This corporation owes the current year Intangible
 Personal Property Tax ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

 PAFFRATH, HELMUT Q
 10937 W BROWARD BLVD
 PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1855 GRIFFIN RD

83

SUITE A-376

84 City

DANIA BEACH

FL

85

Zip Code

33004

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	PAFFRATH, HELMUT	
STREET ADDRESS	10937 W BROWARD BLVD	
CITY-ST-ZIP	PLANTATION FL 33324	

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	PAFFRATH, SUSANNE	
STREET ADDRESS	10937 W BROWARD BLVD	
CITY-ST-ZIP	PLANTATION FL 33324	

TITLE		<input type="checkbox"/> DELETE
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CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-8-79

954-929-2537

CR2E034 (11/98)