PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000056227

QUALITY WHOLESALE, INC.

Mailing Address Principal Place of Business

5686 JASON LEE PL SARASOTA FL 34233

2. Principal Place of Business

Suite, Apt. #, etc.

4183 CORTE LA VISTA SARASOTA FL 34233

2a. Mailing Address

City & State

4183 CORTE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed

08/16/1993

65-0434061

5. Certificate of Status Desired.

6. Election Campaign Financing

4. FEI Number

FILED

Aug 03, 1999 8:00 am Secretary of State

08-03-1999 90005 035 ***150.00

08-13-1999 90010 047 ***400.00

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

TITLE NAME HOLDEN; WILLIAM R. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34233 14 CITY-ST-ZIP TITLE S NAME HOLDEN WILLIAM ROBERT STREET ADDRESS 22 NAME STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS 23 STREET ADDRESS	- 1	
25 29 3 423 30 SARASOTA Personal Property Tax. Yes ZNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HOLDEN, WILLIAM ROBERT 81 Name 4183 CORTE LA VISTA 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 507.0502 and 507.1508. 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, arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Symbor, typed or protect name of registered agent and the if applicable. (NOTE Registered Agent algebrase segiting when revisabling) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE P DELETE 1.11TILE Change Add 14. City F SARASOTA F 34233 14. City ST. Zip 15. TITLE S DELETE 2.1 TITLE Change Add 16. Name and Address of New Registered Agent Address of New Registered Address of New Registered Agent Address of New Registered Agent Address of New Registered Agent Address of New Registered Agent Address of New Registered Agent Address of New Registered A	= =	
9. Name and Address of Current Registered Agent HOLDEN, WILLIAM ROBERT 4183 CORTE LA VISTA SARASOTA FL 34238 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE P		
HOLDEN, WILLIAM ROBERT 4183 CORTÉ LA VISTA SARASOTA FL 34238 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hyped or printed name of registered agent and too if applicable. (NOTE Registered Agent signature signified when revisiting) ATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 1.1 TITLE 1.2 SARASOTA FL 34233 1.4 City FL B5 Zip Code 1.5 NAME 1.5 NAME 1.5 NAME 1.5 NAME 1.5 NAME 1.6 NAME 1.7 NAME 1.8 NAME 1.8 NAME 1.8 NAME 1.9 DELETE 1.9 SARASOTA FL 34233 1.9 Change 1.9 Change	\dashv	
HOLDEN, WILLIAM ROBERT 4183 CORTE LA VISTA SARASOTA FL 34238 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, 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, and accept the objection 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P OFFICERS AND DIRECTORS IN 12 INME 1.3 STREET ADDRESS SARASOTA FL 34233 DELETE 1.3 STREET ADDRESS SARASOTA FL 34233 DELETE 2.1 TITLE Change Add Change Add City FL 85 STREET ADDRESS SARASOTA FL 34233 DELETE 2.1 TITLE Change Add Change Add Change Add Change Add Change Add City FL 85 STREET ADDRESS SARASOTA FL 34233 DELETE 2.1 TITLE 2.2 NAME STREET ADDRESS SARASOTA FL 34233 TITLE SARASOTA FL 34233 TITLE SARASOTA FL 34233 STREET ADDRESS	\dashv	
4183 CORTE LA VISTA SARASOTA FL 34238 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 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, a mr familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 1.1 TITLE Change Add. NAME HOLDEN; WILLIAM R. STREET ADDRESS 5686 JASON LEE PL 1.3 STREET ADDRESS 14 CITY-ST-ZP TITLE S DELETE 2.1 TITLE Change Add. NAME HOLDEN WILLIAM ROBERT 22 NAME 23 STREET ADDRESS 5686 JASON LEE PL 24 JASON LEE PL		
SARASOTA FL 34238 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutas, 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, hyped or printed name of registered agent and title if applicable. (NOTE Registered Agent algents regulared when reinstating) OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P		
11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, arm 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 Apent algreture registred when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P Change Add Change Add City F L B5 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes. The eabove-named corporation submits this statement for the purpose of changing its registered agent and statutes. The expenses agent and statutes are discontinuous and statutes. The section of directors. I hereby accapt the appointment as registered agent and statutes. ATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add Change A		
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 suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title trapplicable. (NOTE Registered Agent signature registed when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (Change Additional Change Addi		
11. Pursuant to the provisions of Sections 807.0502 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 1.1 TITLE Change Add CHANGE TOTAL STREET ADDRESS SARASOTA FL 34233 14 CITY-ST-ZIP SARASOTA FL 34233 DELETE 2.1 TITLE Change Add Change Change Add Change Add Change Change Add Change Cha	7	
office or registered agent, or both, in the State of Florida. Such change was authorized by the Corporation's Season's Corporation's Corporation's Corporation's Corporation's Season's Corporation's Corpo		
TILE POLICENS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE POLICENS AND DIRECTORS 1.1 ITILE 1.2 ITILE 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY. 57-ZP TITLE S DELETE 2.1 ITILE 1.4 CITY. 57-ZP TITLE STREET ADDRESS 5686 JASON LEE PL 2.2 NAME 1.4 CITY. 57-ZP TITLE STREET ADDRESS 5686 JASON LEE PL 2.3 STREET ADDRESS 5686 JASON LEE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P	⊸ ⊊	
TITLE NAME HOLDEN; WILLIAM R. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34233 14 CITY-ST-ZIP TITLE S NAME HOLDEN WILLIAM ROBERT STREET ADDRESS 22 NAME STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS 23 STREET ADDRESS	- ₹	
STREET ADDRESS 5686 JASON LEE PL 13 STREET ADDRESS CITY. 57. ZIP SARASOTA FL 34233 TITLE \$ DELETE 21 TITLE Change Add. Change Add. Change Add. STREET ADDRESS 22 NAME STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS	S IN 12	
CITY-ST-ZIP SARASOTA FL 34233 14 CITY-ST-ZIP ITILE S DELETE 2.1 TITLE CHange Add. HOLDEN WILLIAM ROBERT 22 NAME STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS		
TITLE \$ DELETE 2.1 TITLE CHANGE AND LEEPL 2.3 STREET ADDRESS 5686 JASON LEE PL 2.3 STREET ADDRESS		
TITLE S DELETE 2.1 TITLE CHANGE AND LEEPL 22 NAME 22 NAME STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS	_ ¢	
STREET ADDRESS 5686 JASON LEE PL 23 STREET ADDRESS	າ∣ີ	
SIRETAURESS JOOD WHOOM LEE I'E	- 1	
A CONTRACTOR OF THE CONTRACTOR	-]	
CITY-ST-ZP SARASOTA FL 34233 2.4 CITY-ST-ZP	4	
TITLE T DELETE 2.1 TITLE Change Addit	on	
NULE HOLDEN, WILLIAM ROBERT 32 NAME	- L	
STREET ADDRESS 5886 JASON LEE PL 33 STREET ADDRESS	1	
CITY-ST-ZP SARASOTA FL 34233 34.CITY-ST-ZP		
TITLE DELETE 4,1 TITLE Change Add	on {	
NAME 4.2 MAME		
STREET ADDRESS 4.3 STREET ADDRESS	Į.	
GIY-51-7P 44/GIY-51-7P		
TITLE DELETE 5.1 TITLE Change Add	on	
NAME 5.2 NAME	1	
STREET ADDRESS 5.3 STREET ADDRESS	Ì	
C/TY-ST-ZP 5.4 C/TY-ST-ZP	_	
TITLE DELETE 6.1 TITLE Change Add	on	
NAME 6.2 NAME	1	
STREET ADDRESS 6.3 STREET ADDRESS	}	
6.6 CITY-ST-ZP '		
14. I hereby certify that the information supplied with this filing soes 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 suppliemental 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		

LA VISTA

SIGNATURE