FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT.

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400001530

J & R QUALITY BUILDERS, INC.

Principal Place of Business

Mailing Address

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90025 016 ***150.00



	520 EL RANCHO DR. EESBURG FL 34748 2520 EL RANCHO DR. LEESBURG FL 34748				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
					12/30/1993					
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For			
21 2520	El Kancho Dr. LSB	26 Same			59-3217192	١	Not Applicable			
Suite, Apt. #, etc.					5. Certificate of Status Desired	•	Additional Required			
22 City & Stat		City & State			6. Election Campaign Financing					
23 LEESBURG, F(28					6. Election Campaign Financing \$5:00 May Be Trust Fund Contribution Added to Fees					
24 3474 8 25 USA 29 Country 21p Country 22p Country 23p Country 23				ſ	8. This corporation owes the current year Intangible Personal Property Tax.					
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent				
			81	Name						
CLIFTON, RONALD D 2520 EL RANCHO DR.				Street Ad	Idress (P.O. Box Number is Not Acceptable)					
	SBURG FL 34748		83							
			84	City	· · · · · · · · · · · · · · · · · · ·	85 Zip	Code			
					rporation submits this statement for the purpose of	<u>. </u>				
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS ANI	DIRECTORS	13.	nt signature requ	ADDITIONS/CHANGES TO OFFICERS AN					
TITLE	D OF HOLING AND	☐ DELETE	1.1 TITLE			Change				
NAME	CLIFTON, RONALD D		1.2 NAME		•					
STREET ADDRESS	2520 EL RANCHO DR.		1.3 STREET	TADDRESS			ł			
CITY-ST-ZIP	LEESBURG FL 34748		1.4 CITY-S	T-ZIP						
TITLE	ELEODONIO I E O II 70	☐ DELETE	2.1 TITLE			☐ Change	e Addition			
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREE	TADDRESS		-				
CITY-ST-ZIP			2. 4 CITY- 5	ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE			Change	Addition			
NAME			3.2 NAME							
STREET ADDRESS			3 3 STREE	T ADDRESS			,			
CITY-ST-ZIP			3.4. CITY- S	ST-ZIP						
TITLE		☐ DELETE	4,1 TITLE			☐ Change	e ☐ Addition			
NAME			4, 2 NAME							
STREET ADDRESS			4.3 STREE	T ADDRESS						
CITY-ST-ZIP			4.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	5.1 TITLE		•	Change	Addition			
NAME			5.2 NAME	Ì						
STREET ADDRESS			5.3 STREET	T ADDRESS			ļ			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE			☐ Change	e			
NAME			6.2 NAME				Į			
STREET ADDRESS			6.3 STREET	TADORESS						
			64 CITY-S	T. 710						

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.

35à-365-6722