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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000001793 (6)

1. Corporation Name
FIRST QUALITY ROOFING, INC.

Principal Place of Business
8445 CORAL WAY
MIAMI FL 33155

Mailing Address
8445 CORAL WAY
MIAMI FL 33155-2346



2. Principal Place of Business
21 7312 NW 8 ST #J

Suite, Apt. #, etc.

22 City & State
23 MIAMI, FLORIDA

24 Zip
33126

25 Country
DADE

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified
01/07/1994

3a. Date of Last Report
08/14/1996

4. FEI Number
65-0555929

Applied For
Not Applicable

5. Certificate of Status Desired XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HERNANDEZ, VIAN
8445 CORAL WAY
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/14/97
DATE

12. OFFICERS AND DIRECTORS

TITLE P POSADA, CARLOS ☒ DELETE
NAME
STREET ADDRESS 3321 SW 38 CT
CITY-ST-ZIP HALLANDALE FL

TITLE V RODRIGUEZ, JOSE A ☒ DELETE
NAME
STREET ADDRESS 39 NE 27 ST. #E
CITY-ST-ZIP MIAMI FL 33125

TITLE S RODRIGUEZ, RAMON N ☒ DELETE
NAME
STREET ADDRESS 39 NW 27 ST. #E
CITY-ST-ZIP MIAMI FL 33125

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition
1.2 NAME JHON F. QUINTERO
1.3 STREET ADDRESS 7312 NW 8 ST. #J
1.4 CITY-ST-ZIP MIAMI, FL. 33126

2.1 TITLE V-P/D ☒ Change ☐ Addition
2.2 NAME ARBEY QUINTERO
2.3 STREET ADDRESS 7312 NW 8 ST. #J
2.4 CITY-ST-ZIP Miami, FL. 33126

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: *[Signature]* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/97 865-9226
(305) 262-1277
Date Daytime Phone #

CR2E034 (9/96)