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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000014220 (5)

QUALITY CONTRACTING CONCEPTS, INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



| 5200 NORTH FEDERAL HIGHWAY #2 (1106) FORT LAUDERDALE FL 33308 | | 5200 NORTH FEDERAL HIGHWAY #2 (1106) FORT LAUDERDALE FL 33308 | | DO NOT WRITE IN THIS SPACE | | | |
|--|---|--|----------------------------|---|--|-----------------|---|
| | | | | | 3. Date Incorporated or Qualified 02/17/1994 | | |
| 2. Principal Place of Business 2a. Mailing A | | | ldress | | 4. FEI Number | Ar | plied For |
| 21 | | 26 | 26 | | 65-0477027 | No | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & Sta | ite | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 Added | May Be |
| Zip | Country | Zip | Country | | 8. This corporation owes or has paid the | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. | |] No |
| -7; | g. Name and Address of Curre | | 1001 | | 10. Name and Address of New Registere | | • |
| KE | NNEY, TIMOTHY H | | 81 | Name | | | |
| | 9 BRADLEY PL. | | | | | | |
| PALM BEACH FL 33480 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | 83 | | | | |
| | | | 84 | City | <u> </u> | 85 Zip (| Code |
| 11. Pursuani | t to the provisions of Sections 607.05 | 02 and 607.1508, Florida Statul | es, the above | -named cor | poration submits this statement for the purpose | of changing it | s registered |
| office or | registered agent, or both, in the Stat | e of Florida, Such change was a | authorized by | the corpora | ation's board of directors. I hereby accept the a | appointment as | registered |
| = | | gallons of, Section 607.0303, Fi | Jina Statutes | ٠, | | | |
| SIGNATURE | Signature, typod or printed name of registered as | nent and blic if anolicable (NO) | F Bogistered Age | ni sensitre requ | ered when reinstating) DATE | | |
| 12. | | NO DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTOR | 3S IN 12 |
| THILE | D | DELETE | 1.1 TITLE | | | Change | Addition |
| NAME | BEMENT, RICHARD O | | 1,2 NAME | | | _ | |
| STREET ADDRESS | FAAA MODELL FEDERALL 1804 | HWAY #2 (1106) | 1.3 STREET | ADDRESS | | | |
| CITY-SI-ZIP | FORT LAUDERDALE FL 3330 | | 1.4 CITY-S | į | | | |
| TITLE | VP | DELETE | 2.1 TITLE | 1 · Dit | | Change | Addition |
| NAME | BEMENT, MARIAN D | | 2.2 NAME | | | | |
| STREET ADDRESS 5200 NORTH FEDERAL HIGHWAY, #2 (1106) | | | 2 3 STREET ADDRESS | | | | |
| | FT. LAUDERDALE FL | 1117(1, #2 (1100) | | | • | | |
| CITY+ST-ZIP TITLE | DELETE | | 2. 4 CITY - 5 3.1 TITLE | 1-212 | | Change | Addition |
| NAME | | - Dittert | 3.7 HILE 3.2 NAME | | | one ago | Last - Northern |
| | | | | 1000000 | _ | | |
| STREET ADDRESS | | | 3.3 STREET | | - | | |
| CITY-ST-ZIP TITLE | DELETE | | 3.4 CITY-5 4.1 TITLE | 1- ZIP | | Change | Addition |
| | | | | | | ETT CHANGE | |
| NAME | | | 4. 2 NAME | +000000 | | | |
| STREET ADDRESS | | | 4.3 STREET | | | | |
| CITY-ST-ZIP | | DELETE | 4.4 CiTY - S | I-ZIP | | Change | Addition |
| TITLE | | | 5.1 TITLE | ŀ | | ELI CHANGE | וופוזיטטע נייין |
| NAME | | | 5.2 NAME | ADDOFGS | | | |
| STREET ADDRESS | | | 5.3 STREET | | | | |
| CITY-ST-ZIP | | Florier | 5.4 CITY-S | I - ZIP | | Change | Addition |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Unange | T YOURDO |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY-S | T-ZIP | | | |

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an expowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in I hereby certify that the information supplied with this filing indicated on this annual report of supplemental annual reporter or director of the corporation or the receiver or truster.