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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 04, 1996 08:00 AM
Secretary of State

DOCUMENT # **P94000033264 (0)**

1. Corporation Name

QUALITY ROOFING SYSTEMS, INC.



Principal Place of Business

Mailing Address

**6601 N. 50TH ST.
101 E. KENNEDY BLVD.
TAMPA FL 33610
US**

**P.O. BOX 5214
101 E. KENNEDY BLVD.
TAMPA FL 33675
US**

3. Date Incorporated or Qualified

05/03/1994

3a. Date of Last Report

07/28/1995

2. Principal Place of Business

2a. Mailing Address

21 6601 N. 50th St.

26 P.O. Box 5214

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Tampa, FL

28 Tampa, FL

Zip

Country

Zip

Country

24 33610

25 US

29 33675

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KALISH, WILLIAM
4100 BARNETT PLAZA
101 E. KENNEDY BLVD.
TAMPA FL 33602**

81 Name Richard C. Jenkins

82 Street Address (P.O. Box Number is Not Acceptable) 6601 N. 50th Street

83

84 City Tampa

FL

85 Zip Code 33610

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Richard C. Jenkins, Pres.

(Signature, typed or printed name of registered agent & title, if applicable)

(NOTE: Registered Agent's name is required when the corporation changes its registered agent)

2-27-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**D
JENKINS, RICHARD C
6601 N. 50TH STREET
TAMPA FL**

TITLE ☐ DELETE

**V
GARRISON, JOHN
6601 N. 50TH STREET
TAMPA FL**

TITLE ☐ DELETE

**S
MARTIN, DANIEL
6601 N. 50TH STREET
TAMPA FL**

TITLE ☐ DELETE

**T
DEMASSE, LORRAINE
6601 N. 50TH STREET
TAMPA FL**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

1. TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2. TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3. TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4. TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5. TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6. TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Richard C. Jenkins, Pres.

(Signature and typed or printed name of signing officer or director)

2-27-96 (813)620-4797

DATE

Daytime Phone

CR2E034 (12/95)