SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P94000057511	(5)
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QUALITY APPLIANCE SERVICE & PARTS, INC.

Principal Place of Business Mailing Address 1926 NE 1487H STREET NORTH MIAMI PL 33181 PL 33181							
					 Date Incorporated or Qualified 08/03/1994 	3a. Date of Last Report 06/02/1995	
2. Principal Pl. 21 /286 Suite, Apt. 6		2a. Mailing Address 26 /875 Ni Suite, Apt #, etc	N 108TH 1	<i>que</i>	4. FEI Number 65-05 19879	Applied Fo	able
22 # 23/	•	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	al
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23 NORTH	MIAMI, FC COUNTRY	28 PLANTATIO	Country		Trust Fund Contribution	Added to Fees	
24 3318	1 25 DADE	29 33322	30 BROWA	RD	8. This corporation has liability fo Florida Statutes	r intangible tax under si 190 032 Yes XI No	'.
	9. Name and Address of Curr	rent Registered Agent		ıme	10. Name and Address of New R		
- 100	ER, ROGER C 26 NE 148TH STRE ET IRTH MIAMI FL 33181		83 84 Cit	187 (Plan	ss (P.O. Box Number is Not Accepta	FL 85 Zp Code	
onice or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change wa	is authorized by the c	ed corpor corporation	ation submits this statement for the it's board of directors. Thereby access	Ourses of changing its readers	ud 1
SIGNATURE	Signature, typed or printed runner of regeneracti	active at the target the	NOTe in undered Agent sign				
12.		AND DIRECTORS	13.	stant required	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	1 1 TITLE				dition
NAME	BAER, ROGER C		1.2 NAME				
STREET ADDRESS	1875 NW 108TH AVE		1 3 STREET ADDR.	:SS			
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NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRE	ESS			
CITY-ST-ZIP			3 4 CITY - ST - ZIP				
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STREET ADDRESS CITY-ST-ZIP			4 3 STREET ADORE	ESS			
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NAME		LJ/	5.2 NAME			□ orange □□ Aug	116.6381
STREET ADDRESS			5.3 STREET ADDRI	ESS			
CITY-ST-ZIP			5 4 CITY - \$1 - 7IP]
TITLE		DELETE	6 1 TITLE			Change Add	fit-on
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREET ADORE	ESS			
CITY-ST-ZIP	ne codify that the information	and with the folia filler in	6.4 CHY - S1 - ZIP				
made und	ler oath, that Lam an officer or dire ame appears in Block 12 or Block 1	on this annual report or supple clor of the corporation or the n 3 if changed, or on an attachn	emental annual report eceiver or trustee em nent with an address 	t is true and apowered t	of the exemption stated in Section discourate and that my signature sho execute this report as required by 7 7-49-96	all have the same legal effect as Chapter 617, Florida Statutes, a	; it ind
	SIGNATURE AND TYPED	OR PRINTED NAME OF SIGNING OFFIC	CER OR DIRECTOR	<u>-</u>		Daytne Priso #	• •