

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 18 PM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000062682 (7)

1. Corporation Name

SOUTHERN QUALITY SERVICES, INC.

Principal Place of Business

3031 SW 202ND AVE
FT LAUDERDALE FL 33332

Mailing Address

3031 SW 202ND AVE
FT LAUDERDALE FL 33332

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/25/1994

3a. Date of Last Report

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

REED, TIMOTHY
3031 SW 202ND AVE
FT LAUDERDALE FL 33332

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, typed or printed name of registered agent and title if applicable

Signature, typed or printed name of registered agent and title if applicable

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
REED, TIMOTHY
3031 SW 202ND AVE
FT LAUDERDALE FL 33332

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY - ST - ZIP

14.1 TITLE
14.2 NAME
14.3 STREET ADDRESS
14.4 CITY - ST - ZIP

15.1 TITLE
15.2 NAME
15.3 STREET ADDRESS
15.4 CITY - ST - ZIP

16.1 TITLE
16.2 NAME
16.3 STREET ADDRESS
16.4 CITY - ST - ZIP

17.1 TITLE
17.2 NAME
17.3 STREET ADDRESS
17.4 CITY - ST - ZIP

18.1 TITLE
18.2 NAME
18.3 STREET ADDRESS
18.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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)(b), 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:

Timothy Reed
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/95 305 3247162
Date Signature