

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 # P94000086216 (6)

1. Corporation Name

S & S QUALITY HOME CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

544 PASAJE AVE
APT A
TARPON SPRINGS FL 34689

544 PASAJE AVE
APT A
TARPON SPRINGS FL 34689

3. Date Incorporated or Qualified
11/29/1994

3a. Date of Last Report
10/05/1995

2. Principal Place of Business

2a. Mailing Address

21 4912 Picture ave

26 4912 Picture ave

4. FEI Number
59-3280318

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

23 Holiday FL.

28 Holiday FL.

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip
34691

25 Country
Pasco

29 Zip
34691

30 Country
Pasco

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAVOPOULOS, STAVROS
544 PASAJE AVE
APT A
TARPON SPRINGS FL 34689

81 Name
Stavros Savopoulos
82 Street Address (P.O. Box Number is Not Acceptable)
4912 Picture ave
83
84 City
Holiday FL 85 Zip Code
34691

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

President Stavros Savopoulos

June 27, 1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
SAVOPOULOS, STAVROS
544 PASAJE AVE
TARPON SPRINGS FL 34689

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
Stavros Savopoulos
4912 Picture ave
Holiday FL. 34691

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

500001889135
-07/10/96--01024--019
***225.00

070996 OR

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

President Stavros Savopoulos

June 27, 96 813-997-0920

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR