FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 30 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P9500000628 (4) QUALITY VALET SERVICE, INC. Principal Place of Business Mailing Address 1232 WHITE PINE DRIVE 1232 WHITE PINE DRIVE WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1995 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 21 913 LEMANGRASS 913 LEMONGRASS 65-0554154 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing FLORIDA WELLINGTON FLORINA WELLINGTON Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 33414 Yes □ No 24 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BELLINATO, JACK BCLLINATO Street Address (P.O. Box Number is Not Acceptable) 1232 WHITE PINE DRIVE 82 **WEST PALM BEACH FL 33414** 83 LEMON GRASS Zip Code 84 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition **BELLINATO, JOHN** NAME 1.2 NAME 9130 D S.W. 5TH STREET STREET ADDRESS 1.3 STREET ADDRESS OREGON **BOCA RATON FL 33428** RATON CITY-ST-ZIP 1.4 CITY-ST-ZIP EL TITLE DELETE 2.1 TOLE Change Addition **BELLINATO, JACK** 2.2 NAME 1232 WHITE PINE DRIVE STREET ADDRESS 23 STREET ADDRESS 913 LEMONGRASS LANE WELLINGTON FL 33414 CITY-ST-ZIP 2.4 CITY-ST-ZIP WELLINGSON FL 33414 DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

BELLINAID

54 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

61 TITLE

6.2 NAME

DELETE

4-23-98

561 793 3946

Change

☐ Addition