SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR PEPORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P95000001967 (5)

QUALITY PAVEMENT MARKINGS, INC.

FILED

98 AUG 11 PM 2: 20

SECRETARY OF STATE TALLAHASSEE. FLORIDA



| Principal Place | e of Business | | M | ailing Address | | | | t todatekat tan anam datit datit datit datit datit anist datin takin takin anist datin 1881 | | |
|---------------------------------|--------------------------------------|-------------------|-----------------------|---------------------------------|--------------------------|------------------|--------------------------|--|--|--|
| 5751 NW 19181 MIAMI FL 33015 | | | | 51 NW 1918T TER AMI FL 33015 | | | | | | |
| MIRMI FE 33013 | J | | MIZ | MMI FL 33013 | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | | | 3. Date Incorporated or Qualified | | |
| | | | | | | | | 12/21/1994 | | |
| 2. Principal P | lace of Business | | 2a | . Malling Address | | | | 4. FEI Number Applied For | | |
| 21 | · | | | [26] | | | | 65-0542023 Not Applicable | | |
| Suite, Apt. #, etc, | | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional | | |
| 22 | | | | 27 | | | | Fee Required | | |
| City & State | | | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | |
| 23 | | | 28 | 28 | | | | Trust Fund Contribution Added to Fees | | |
| Zip | Country | | | Zìp Cour | | | | | | |
| 24 | 25 | | 29 | | 30 | | | Personal Property Tax due June 30. Yes No | | |
| | | Address of Curre | ent Regis | stered Agent | | 81 | Nome | 10. Name and Address of New Registered Agent | | |
| | IROSA, JAIME I | | | | | ٠ ٠ | Name Spiee | el & Utrera, P.Ad/b/a AmeriLawve | | |
| 5751 NW 191ST TER | | | | | | | Street Ad | Legel & Utrera, P.A., d/b/a AmeriLawyer | | |
| MIAN | MI FL 3 3015 | | | | | В3 | 34 | 3 Almeria Avenue | | |
| | | | , | | | 63 | | | | |
| | | | / | | | 84 | City | oral Gables FL 85 Zip Code 33134 | | |
| | | | | | | | <u>C</u> | oral Gables FL 33134 | | |
| 11. Pursuant | t to the provisions registered agent | of sections 607.0 | 02 and 6. te elÆlo | 07.1508 Florida Statute | es, ine ab authorize: | ove-n i by fl | named corp he cereora | oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered | | |
| agent. I a | am fa mb.PJut | 18 decept in | SPHINE | Section Ason 0500 Fil | Di Aa Bital | ame | erila | wyer | | |
| SIGNATURE. | By: | | ווייען | TIA E E DE | | | | | | |
| 12. | Signature, typed o | OFFICERS A | | ApplicaVice-Pin | 969LG | BUI | int signature re | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | D | OFFICERS | IND DINE | X DELETE | 1.1 77 | 1 F | ъ | amp. | | |
| NAME | ROVIROSA, JA | MME N | | DK J DECE IE | 1.2 NA | | | STD Ly Change LX Addition ntonio J. Reyes | | |
| STREET ADDRESS | 5751 NW 191 | | | | | | | 751 Northwest 191 Terrace | | |
| | MIAMI FL 330 | | | | | Y-ST-Z | | iami, Florida 33015 | | |
| CITY-ST-ZIP TITLE | THE SHILL SOO | 10 | | DELETE | 2.1 TI | | TP INI | Change Addition | | |
| NAME | | | | □ DECE IE | 2.2 NA | | | Change Addition | | |
| STREET ADDRESS | | | | | 1 | | DDRESS | - DR 1911 - HOS | | |
| CITY-ST-ZIP | | | | | | Y-ST-Z | | ************************************** | | |
| TITLE | | | | DELETE | 3.1 TI | | | 200002614 | | |
| NAME | | | | [] DECE IE | 3.2 NA | | | <u> </u> | | |
| STREET ADDRESS | | | | | | | DDRESS | -08/13/9801101005 | | |
| 1 | | | | | | Y-ST-Z | | ****550.00 ****550.00 | | |
| CITY-ST-ZIP TITLE | | | | DELETE | 4.1 10 | | -11 | Change Addition | | |
| NAME | | | | ☐ DETE LE | 4.2 NA | | | L_I Change L_I Addition | | |
| | | | | | | | DDRESS | | | |
| STREET ADDRESS | | | | | | | | | | |
| CITY-ST-ZIP TITLE | | | | DELETE | 5.1 TI | Y-ST-Z | LIF | Change Addition | | |
| NAME | | | | T DELETE | 5.2 NA | | | L Change L Addition | | |
| STREET ADDRESS | | | | | | | DDRESS | | | |
| | | | | | | | | | | |
| CITY-ST-ZIP TITLE | | | | DELETE | 6.1 TI | Y-ST-Z LF | ur | Change Addition | | |
| NAME | | | | DELETE | 6.2 NA | | | Change Addition | | |
| STREET ADDRESS | | | | | | | DDRESS | | | |
| CITY-ST-ZIP | | | | | | Y-ST-Z | | $\Delta(I)$ | | |
| United 1:51:21 | i | | | | ■ U T UI | 1-51.5 | . PT | , , , , , , , , , , , , , , , , , , , | | |

14. I hereby 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 oals. Not if an 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 many explanars in Block 12 or Block 13 if changed, or on an attachment with an address.

Mathada Paras