5-1-98 B (135 C) FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000020595 (1)

QUALITY INDUSTRIAL CHEMICALS, INC.

Principal Place of Business

1

新学院 情報養養を表れたにないないという

Mailing Address

FILED
May 01 1998 8:00am
Secretary of State



10471 75TH STREET NORTH LARGO FL 33777 US			10471 75TH STREET NORTH LARGO FL 33777 US				DO NOT 3. Date incorporated or Qua	WRITE IN THIS	SPACE	<u>-</u>	
							03/13/1995				
2. Principal Place of Business			2a. Mailing Address 26 3161 118 ⁺¹ Avenue Us			•	4. FEI Number	78400		oplied For	
21 3 6		are No.	26 36 Suite, Apt. #, etc.	O' AV	thut N	*	59-3313793			ot Applicable	
Suite, Apt. #, etc.			27				5. Certificate of Status Desired See Required Fee Required				
23 St. Peters burg FL			City & State 28 St. Petersburg, FC				Election Campaign Finance Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 13	Country Country		Zip	Coul	K						
24	25 U	SA	29 33716 30			1	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.				
	g. Name and Addre					1	10. Name and Address of N		Agent		
PROFITT, RUSSELL C 81 Name											
ANADATE MANAGE MANAGE							(P.O. Box Number is Not Ac	centable)			
LARGO FL 33777						. 1	118th Avenue				
- -				ſ	33						
				-	84 City				AE Zin	Code	
					City	t. 6	Petersburg	FL	85 Zip (いっし	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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. (NOTE Registered Agent signature required when reinstating). DATE											
12.	OF	TICERS AND D	IRECTORS	13.			ADDITIONS/CHANGES TO	OFFICERS ANI	D DIRECTOF	RS IN 12	
TITLE	Ď		DELETE	1.1 TIT	.E				Change	Addition	
NAME	Profitt, Russeli	LC		1.2 NA	AE						
STREET ADDRESS	11278 54TH AVEN	ue north	1.3		EET ADDRESS						
CITY-ST-ZIP	ST. PETERSBURG	FL 33708		1.4 CIT	r-ST-ZIP]	
TITLE	8		DELETE	2.1 111	E				☐ Change	☐ Addition	
NAME	C ULLERS, ALYCE			22 NA	NE						
STREET ADDRESS	1125 14TH AVENU	e North		2.3 STF	EET ADDRESS						
CITY-ST-ZIP	ST PETERSBURG	FL 33705		2.401	Y-ST-ZIP						
TITLE			☐ DELETE	3.1 TIT	E				☐ Change	Addition	
NAME				3.2 NA	AE						
STREET ADDRESS				3.3 STR	EET ADDRESS						
CITY-ST-ZIP				3.4. CIT	Y-ST-ZIP						
TITLE			☐ DELETE	41 111	E				Change	Addition	
NAME				4. 2 NA	ME						
STREET ADDRESS				4.3 STF	eet address						
CITY-\$T-ZIP			· 		(-ST-ZIP						
TITLE			[_] DELETE	5.1 TITI	E				Change	Addition	
NAME				5.2 NA	AE						
STREET ADDRESS				5 3 STA	EET ADDRESS						
CITY+ST-ZIP					/-ST-ZIP						
TITLE			DELETE	6.1 TIT	E				Change	Addition	
NAME				6.2 NAI	(F					j	
STREET ADDRESS				63 STF	EET ADDRESS						
CITY-ST-ZIP					(-SI-ZIP						
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 armual report or suppliencental 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.											