Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90103 003 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address 3161 118TH AVENUE NO

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000020595

1. Corporation Name

Principal Place of Business

3161 118TH AVENUE NO

QUALITY INDUSTRIAL CHEMICALS, INC.

	SBURG FL 33716 ST PETERSBURG FL 33716									
US	US					DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE			
	•	•				3. Date Incorporated or Qualifed				
						03/13/1995				
Principal Place of Business 2a. Mailing Address						4. FE! Number	Ĺ	Арр	ied For	
21	26				59-3313793 <u> </u>	Not Applicable				
Suite, Apt. #, etc. Suite, Apt. #, etc.			•			5. Certifcate of Status Desired	•		Iditional	
27						5. Certificate of Status Desired	Fe	e Req	uired	
City & State City & State				6. Election Campaign Financing \$5.00 May B			1ay Be			
28				<u> </u>		Trust Fund Contribution	Ad	ded to	Fees	
Zip	Country Zip Cour			у		8. This corporation owes the current year Inta	angible		ا م	
24	25 29 30				Personal Property Tax. Yes INO					
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent			
			81	1 1	Name	·				
PROFITT, RUSSELL C				2 5	Stroot Addra	ess (P.O. Box Number is Not Acceptable)				
3161 118TH AVENUE, NO				•	olleet Addie	ess (F.O. Box Number is Not Acceptable)				
ST PETERSBURG FL 33716			83	3						
			84	1 (City	FI	85	Zip C	ode	
44 Bussiant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutos	the abov	/e-n	amed como	pration submits this statement for the purpose of	 changir	a its r	egistered	
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.										
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	fa Statutes	S.						
SIGNATURE			******			d when reinstating) DATE				
42	Signature, typed or printed name of registered agent OFFICERS AND		13.	ant sit	Justona redomed	ADDITIONS/CHANGES TO OFFICERS AN	D DIRE	CTOF	S IN 12	
12.	D	DELETE	1.1 TITLE			ADDITIONO/GIANICEO TO CITTOENCY	Cha		Addition	
	PROFITT, RUSSELL C	₩ DECE 10	1.2 NAME					•	_	
NAME	A A STATE OF A STATE OF A A A A A A A A A A A A A A A A A A									
STREET ADDRESS			1.3 STREE						-	
CITY-ST-ZIP			1.4 CITY-5		P		Cha	nga	Addition	
TITLE	,		2.1 TITLE					iige		
NAME	CULLERS, ALYCE		2.2 NAME							
STREET ADDRESS	1125 14TH AVENUE NORTH		2.3 STREE	ETAD	DRESS				ļ	
CITY-ST-ZIP	ST PETERSBURG FL 33705		2.4 CITY+	ST-Z	OP					
TITLE		☐ DELETE	3.1 TITLE				☐ Cha	inge	☐ Addition	
NAME			3.2 NAME		-	and the second s	-			
STREET AODRESS			3.3 STREE	ET AD	DRESS					
ČITY-ST-ZIP			3.4. CITY-	ST-Z	DP					
TITLE		☐ DELETE	4.1 TITLE		-		Cha	inge	☐ Addition	
NAME			4. 2 NAME	•	- 1					
STREET ADDRESS			4.3 STREE	ET AD	DRESS					
CITY-ST-ZIP			4.4 CITY-5	ST-ZI	P					
TITLE		☐ DELETE	5.1 TTLE				☐ Cha	nge	Addition	
NAME			5.2 NAME				-			
STREET ADDRESS			5.3 STREE	ETAD	ORESS					
CITY-ST-ZIP			5.4 CITY-5	ST-ZI	P					
TITLE		☐ DELETE	6.1 TITLE				Cha	inge	Addition	
NAME .			6.2 NAME				_	-	_	
STREET ADDRESS			6.3 STREE	ET AD	DRESS				ļ	
GINCE I ADDRESS										

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

CfTY-ST-ZIP