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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000033278 (9)

1. Corporation Name
QUALITY ACCOUNTING & GENERAL SERVICES CORPORATIO
N



Principal Place of Business

6555 NW 36TH STREET
SUITE 316
VIRGINIA GARDENS FL 33166
US

Mailing Address

6555 NW 36TH STREET
SUITE 316
VIRGINIA GARDENS FL 33166-6975
US

2. Principal Place of Business

21 6555 N.W. 36th STREET
Suite, Apt. #, etc

22 SUITE #328
City & State

23 VIRGINIA GARDEN'S, FL
Zip Country

24 33166-6975 25 U.S.A.

2a. Mailing Address

26 6555 N.W. 36th STREET
Suite, Apt. #, etc

27 SUITE #328
City & State

28 VIRGINIA GARDEN'S, FL
Zip Country

29 33166-6975 30 U.S.A.

9. Name and Address of Current Registered Agent

RAVELO, RICARDO
755 W 22 ST
HIALEAH FL 33010

3. Date Incorporated or Qualified

04/28/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0589345

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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
officer 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 of type and position of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST
NAME CRUZ-NATAL, MILDRED A
STREET ADDRESS 6715 W 26 DR UNIT 204
CITY, ST, ZIP HIALEAH GARDENS FL 33016-2834

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

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CITY, ST, ZIP

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TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 contained 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 Section 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/97 (305) 870-9670

CR2E034 (9/96)