

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

FILED
Mar 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000047968 (8)

1. Corporation Name

QUALITY FIRST HOMES, INC.

Principal Place of Business

3267 N.W. 168TH ST.
NORTH MIAMI BEACH FL 33160
US

Mailing Address

3267 N.E. 168TH ST.
NORTH MIAMI BEACH FL 33160
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1996

4. FEI Number

65-0703911

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 800 NE 195 ST

Suite, Apt. #, etc.

22 207

City & State

23 N. MIAMI BEACH FL

Zip

24 33179

Country

25 USA

2a. Mailing Address

26 800 NE 195 ST

Suite, Apt. #, etc.

27 207

City & State

28 N. MIAMI BEACH FL

Zip

29 33179

Country

30 USA

9. Name and Address of Current Registered Agent

DOLCHIN, STEVEN B
4330 SHERIDAN ST SUITE 202B
HOLLYWOOD FL 33021

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 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. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
GAMEL, BENNETT
STREET ADDRESS 388 NE 195TH ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179

TITLE ☐ DELETE

NAME D
EPSTEIN, ROBIN ROTHBAUM
STREET ADDRESS 3267 N.E. 168TH ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME D. PARK, SCL.
1.3 STREET ADDRESS GAMEL, BENNETT
1.4 CITY-ST-ZIP 800 NE 195 ST #207
NORTH MIAMI BEACH FL 33179

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME V.P.
3.3 STREET ADDRESS DANIEL EPSTEIN
3.4 CITY-ST-ZIP 20355 NE 34 CT #1822
AVENTURA, FL 33180

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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.

SIGNATURE: BENNETT GAMEL, PRES

8/3/98

305
5463343

CR2E034 (1097)