

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

FILED
May 19 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 # P96000048910 (9)
1. Corporation Name
QUALITY SPRINKLER SERVICES AND LANDSCAPING, INC.



Principal Place of Business
640 OLD DIXIE HWY
VERO BEACH FL 32960
US

Mailing Address
P.O. BOX 1414
VERO BEACH FL 32961

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1755 9th St SW Suite, Apt. #, etc.		2a. Mailing Address 26 P O Box 1414 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/05/1996	
22 City & State 23 Vero Beach FL		27 City & State 28 VB FL		4. FEI Number 65-0683344 Applied For Not Applicable	
24 Zip 32962		25 Country USA		5. Certificate of Status Desired 8.75 Additional Fee Required	
29 32961		30		6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees	
29 32961		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent
PETERSON, VALARIE
14225 101ST STREET
FELLSMERE FL 32948

10. Name and Address of New Registered Agent
81 Name Valarie Peterson
82 Street Address (P.O. Box Number is Not Acceptable).
83 1755 9th St SW
84 City Vero Beach FL 85 Zip Code 32962

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 Valarie Peterson, Pres

X Peterson

5-1-98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES	1.1 TITLE	
NAME	PETERSON, VALERIE	1.2 NAME	
STREET ADDRESS	640 OLD DIXIE HWY	1.3 STREET ADDRESS	1755 9th St SW
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	Vero Beach FL 32962
TITLE	VP	2.1 TITLE	
NAME	PETERSON, LUTHER S	2.2 NAME	
STREET ADDRESS	640 OLD DIXIE HWY	2.3 STREET ADDRESS	1755 9th St SW
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	Vero Beach FL 32962
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 X Peterson

5-1-98

324778-9388

CR2E034 (10/97)