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

PROFIT CORPORATION ANNUAL REPORT

1998

を食用にあるの 表面が 動物を引めても特別の可能の対象があれない。例如できたのではないのであれてはなったというでしたできる機能はあれる中でもし



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000039589 (1)

QUALITY FLOORS & INTERIORS, INC.

FILED Apr 24 1998 8:00am Secretary of State

| Principal Place | of Business | Mailing Address | | | . 1601/081 110 15131 15511 55311 55311 55411 55111 56161 61161 61161 15116 (631 1651 | |
|--|--|--|------------------------|--------------------|--|----------------|
| 6836-8 SOUTHWEST 40TH STREET 6836-8 SOUTHWEST 40TH MIAMI FL 33155 MIAMI FL 33155 | | | STREET | | DO NOT WRITE IN THIS SPACE | |
| | | | | | 3. Date Incorporated or Qualified | ٦ |
| | | | | | 05/05/1997 | |
| | ace of Business | 2a. Mailing Address | | | 4. FEI Number Applied For | |
| 21 684 | | 26 6844 SW | 40 € | T | 65-0750496 Not Applicable | <u> </u> |
| Sulte, Apt. (| #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | |
| City & State 23 MIAMI FL | | City & State 28 MIAMI FL | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip | Country | , | 8. This corporation owes or has paid the current wear Intangible | ┪ |
| 24 33 | 155 ₂₅ | <u>├</u> ── *ウ/) 。 / /- | 30 | | Personal Property Tax due June 30. Pyes No | |
| | 9. Name and Address of Current | Registered Agent | | | 10. Name and Address of New Registered Agent |] |
| AM | ERILAWYER CHARTERED | | B1 | Name | ne e | |
| 343 ALMERIA AVENUE | | | | Street | et Address (P.O. Box Number is Not Acceptable) | \dashv |
| CO | RAL GABLES FL 33134 | | | | | |
| | | | 83 | | | |
| | | | 84 | City | FL 85 Zip Code | 1 |
| 11. Pursuant t | o the provisions of Sections 607.0502 | and 607.1508, Florida Statutes | s, the abov | e-named | ed corporation submits this statement for the purpose of changing its registered | Н |
| office or re | egistered agent, or both, in the State on familiar with, and accept the obligat | l Florida. Such change was au | ithorized by | the corp | orporation's board of directors. I hereby accept the appointment as registered | |
| | Treatment with and accept the obligation | ions of odelion bos.0303, Flori | nda Olatoto | ο, | | 1 |
| SIGNATURE | Signature, typed or printed name of registered agent | and tille if applicable (NOH: | Registered Age | n; signature | ture required when reinstating) DATE | ١ |
| 12, | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | ַקְיב <u>ַ</u> |
| TITLE | PSTD | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition | ۱ <u>۱</u> |
| NAME RODRIGUEZ, ORLANDO JR | | 1.2 NAME | | \$ 14950 EW 157 CT | 3 | |
| STREET ADDRESS | 6836-B SOUTHWEST 40TH ST | KEEI | 1 | ADDRESS | MIAMI FL 33196 | إ |
| CITY-ST-ZIP | MIAMI FL 33155 | Driere | 1.4 CHY-S | I - ZIP | | 4 |
| TITLE | | ☐ DEL E TE | 2.1 TITLE | | Change Addition | Ί, |
| NAME STATES ADDRESS | | | 2.2 NAME 2.3 STREET | ADDRESS | | 1 |
| STREET ADDRESS | | | | | 5 | |
| CITY-ST-ZIP TITLE | | DELETE | 2. 4 CITY - 3.1 TITLE | 51 - ZIP | Change Addition | |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3 3 STREET | ADDRESS | s | - |
| CITY-ST-ZIP | | | 3.4. CiTY-5 | | | İ |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition | ī |
| NAME | | | 4. 2 NAME | | j | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | s | |
| CITY-ST-ZIP | | | 4.4 CITY - S | T - ZIP | | |
| TITLE | | ☐ DELÉTE | 5.1 TITLE | | Change Addition | ١ [|
| NAME | | | 5.2 NAME | ļ | | İ |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | s | |
| CITY-ST-ZIP | | ··· | 5.4 CITY - S | 1-2IP | | _ |
| TITLE | | DELETE | 6.1 TITUE | | Change | ' [|
| NAME . | | | 6.2 NAME | | | |
| STREET ADDRESS | / / | (| 6.3 STREET | | S | |
| CITY-ST-ZIP | ortify that the information | the time about the | 64 MIY-S | | start in Section 110 07/2V(). Florida Statutas 1 further earlifu that the information | 4 |
| indicated o | ertify that the information supplies with on this annual report or supplies what | arity al report is the and accur | rate and the | at my sig | ated in Section 119.07(3)(i), Florida Statujes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am an | |
| officer or d Block 12 o | li rec tor of the corporation or th o receiver Block 13 if changed for only eatlach | figer trustee er flowered to ex ment with an address. | cute this | report as | as required by Chapter 607, Florida Statutes; and that my name appears in | |
| | | | \sim | | H/2 (98 (95) Wer 2511 | - |
| SIGNATI | URE: //w | | | 4-0-0- | N 1/ (10 (10) m. | |