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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P97000049116 (1)

FILED Apr 15 1998 8:00am Secretary of State

QUALITY PLUS CLEANER & TRAVEL, INC.								
							1 10 0 110 0 1 10 10 10 10 10 10 10 10 1	
Principal Place of Business Mailing Address							T desiles the rath had been devis desir east of the rate state that and the same is the same that	
13045 WEST DIXIE HWY 13045 WEST DIXIE HWY							·	
N. MIAMI FL 33161 N. MIAMI FL 33161						DO NOT WOITE IN THIS SPACE		
							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
							· '	
2. Principal Place of Business 2a. Mailing Address			-			06/02/1997 4. FEI Number Applied For		
	riace of Business	· · · · · · · · · · · · · · · · · ·	2e. Mailing Address				4. FEI Number Applied For Not Applicable	
21			Suite, Apt. #, etc.				\$8.75 Additional	
Suite, Apt. #, etc.							5. Certificate of Status Desired Fee Required	
City & Stat	00	27 City & S	City & State					
23	10	<u> </u>	28				8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip					This corporation owes or has paid the current year Intangible	
24	25	29 30		\neg			Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Curre			301			10. Name and Address of New Registered Agent	
DE	· · · · · · · · · · · · · · · · · · ·				81	Name		
	EGRAFF, LOUIS				82			
	045 WEST DIXIE HWY					Street Ac	Address (P.O. Box Number is Not Acceptable)	
N.	MIAMI FL 33161			•	83			
					84	City	FL 85 Zip Code	
11 Dureuent	to the provisions of Sections 607.05	02 and 607 1508	Florida Statute	s the at	oove	-nemed co	progration submits this statement for the purpose of changing its registered	
office or i	registered agent, or both, in the State	e of Florida, Such	change was a	uthorized	d by	the corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
agent. I a	am familiar with, and accept the obli	gations of Section	607.0505, Flo	rida Stat	utes	•	4-8-98	
SIGNATURE		ouls be	Graff	Ponistores	4 400	nl nional ve re	quired when reinstating) DATE	
12.		ND DIRECTORS	, more	13.	o rigidi	in organization	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	b		DELETE	1.1 10	TLE		☐ Change ☐ Addition	
NAME	DEGRAFF, LOUIS			1.2 NAME				
STREET ADDRESS	13045 WEST DIXIE HWY		1.3 ST	1.3 STREET ADDRESS				
CITY-ST-ZIP	N. MIAMI FL 33161			1.4 CITY-ST-ZIP				
TITLE	D		DELETE	2.1 TITLE		·	Change Addition	
NAME	DEGRAFF, GUSTAVE	_		2.2 N	2.2 NAME			
STREET ADDRESS	13045 WEST DIXIE HWY			2.3 ST	REET	ADDRESS	.	
CITY-ST-ZIP	N. MIAMI FL 33161			2.40		1		
TITLE	D DELETE		_	3.1 TITLE		Change Addition		
NAME	BARJOIN, FRITZ		_	3.2 NA	AME			
STREET ADDRESS	13045 WEST DIXIE HWY					ADDRESS		
CITY-ST-ZIP	N. MIAMI FL 33161			3.4. D				
TITLE	7	<u>I</u>	DELETE	4.1 10		1	Change Addition	
NAME	1 🐷	NIC		4. 2 N			DEGRAFF, YOLONE	
STREET ADDRESS	יייטן ווויייטשבען					1.		
	118084 NW 40PL	•		4.3 \$1	TREET.	ADDRESS	8084 NW 40Pl	
ATTV . 67 . 710	DEGRAFF, Yole 18084 NW HOPL MIRMILEL 3305	5				ADDRESS	DEGRAFF, YOLENE 8084 NW 40Pl MIRMI 1 F/ 33055	
CITY-ST-ZIP	18084 NW HOPL MIAMI, FL 3305	55	DELETE		TY-\$1	ADDRESS 1	8084 NW 40Pl MIAMI / Fl 33055	
TITLE	MIAMI, FL 3305	55	DELETE	4.4 CI	TY-\$1 TLE	ADDRESS 1	MIAMI / Fl 33055	
TITLE NAME	MIAMI, FL 3305	55	DELETE	4.4 CI 5.1 TI 5.2 N/	TLE AME	T-ZIP	MIAMI / Fl 33055	
TITLE NAME STREET ADDRESS	18084 NW HOPL MIAMI, FL 3305	55	DELETE	4.4 CI 5.1 TI 5.2 N/ 5.3 ST	TY-SI TLE AME TREET	T-ZIP	MIAMI / Fl 33055	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	18084 NW HOPL MIAMI, FL 3305	1	DELETE	4.4 CI 5.1 TI 5.2 N/	TY-SI TLE AME TREET	T-ZIP	MIAMI / Fl 33055	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	18084 NW HOPL MIAMI, FL 3305	1		4.4 CI 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI	TY-ST TLE AME TREET . TY-ST TLE	T-ZIP	MIAMI / F(33055	
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	18084 NW HOPL MIAMI, FL 3305	1		4.4 CI 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI 6.2 NA	TY-SI TLE AME TREET . TY-SI TLE AME	T-ZIP	MIAMI / F(33055	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	18084 NW HOPL MIAMI, FL 3305	1		4.4 CI 5.1 TI 5.2 NA 5.3 ST 5.4 CI 6.1 TI 6.2 NA	TY-SI TLE AME TREET TLE AME TLE AME	ADDRESS T-ZIP ADDRESS	MIAMI / F(33055	

Thereby 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 changes for on an attachment with an address.

DOIS NO GRAFE 4-8-98

200.893-166D