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FILED

May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # P97000093631 (4)

1. Corporation Name

QUALITY IMPROVEMENTS, INC.

Principal Place of Business

10945 SW 48TH ST
MIAMI FL 33165

Mailing Address

10945 SW 48TH ST
MIAMI FL 33165



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/31/1997

4. FEI Number

65-0822177

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$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 10945 SW 48 st

Suite, Apt. #, etc.

22 House

City & State

23 Miami, Fla

Zip

24 33165

Country

25 U. S.

2a. Mailing Address

26 10945 SW 48 st.

Suite, Apt. #, etc.

27 House

City & State

28 Miami, Fla.

Zip

29 33165

Country

30 U. S.

9. Name and Address of Current Registered Agent

NUNEZ, RUDOLFO
502 E PARK AVE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

Jose W. Gonzalez

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

502 E Park Av

83

84 City

Tallahassee

FL

85 Zip Code

32301

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

Jose W. Gonzalez

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

4-5-98

12. OFFICERS AND DIRECTORS

TITLE President ☐ DELETE

NAME Jose Gonzalez

STREET ADDRESS 10945 SW 48 st

CITY-ST-ZIP Miami, Fla 33165

TITLE Registered agent ☒ DELETE

NAME Rudolfo Nunez

STREET ADDRESS 502 E Park AV

CITY-ST-ZIP Tallahassee FL 32301

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 Agent P ☐ Change ☒ Addition

1.2 NAME Jose Gonzalez

1.3 STREET ADDRESS 10945 SW 48 st

1.4 CITY-ST-ZIP Miami, Fla 33165

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

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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:

Jose W. Gonzalez 4-5-98 (305) 274-9970

CR2E034 (10/97)

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