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

DOCUMENT # P97000098493 (4)

BEST QUALITY INVESTMENT, INC.

Principal Place of Business		Mailing Address		, seembel ma som som of the sour sour sour sour sour sour sour sour
13391-F SW 88 TERRACE		13391-F SW 88 TERRACE		
MIAMI FL 33186		MIAMI FL 33186	4	DO NOT WRITE IN THIS SPACE
1				3. Date Incorporated or Qualified
				11/19/1997
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21	H	26		65-0822908 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29 30	0	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
AMERILAWYER 81 Name DOMINIQUE DUNONT				
343 ALMERIA AVENUE			82 Street	Address (P.O. Box Number is Not Acceptable)
CORAL GABLES FL 33134			83 13	391-1 S.W. 88 TERRACE
			83	
1			84 City	Them FL 85 Zip Code 33386
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 althorized 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 X Signature, typod or printed name of registered agent and the interpretable (NOTE: Registered Agent signature required when reinstalling) DATE DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE	Mesident, Secretary Director Change Addition
NAME	DUMONT, DOMINIQUE		1.2 NAME	Donout Donalique
STREET ADDRESS	13391-F SW 88 TERRACE		1.3 STREET ADDRESS	13391 - F' S.W. 88 terr
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY - ST - ZIP	MIANI PI 3386
TITLE	DUMONT JEAN	☐ DELETE	2.1 TITLE	Dunont, Jean Change MAddition
NAME	1		2.2 NAME	TREASURER, DIRECTOR &
STREET ADDRESS			2.3 STREET ADDRESS	13391-8 SW 88 tearace
CITY-ST-ZIP			2.4 CITY-ST-ZIP	MAN 61 33186
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP	Change Addition
NAME			4.1 HILE 4. 2 NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS		1	5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition

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 changes, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

64-25-98

FILED

May 04 1998 8:00am

Secretary of State