

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # P99000006316

1. Entity Name

A Q QUALITY DISTRIBUTORS, INC.

02 DEC 27 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

7925 N.W. 12TH ST

3. Mailing Address

7925 N.W. 12TH ST

Suite, Apt. #, etc.

SUITE 318

Suite, Apt. #, etc.

SUITE 318

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33126

Country

USA

Zip

33126

Country

USA

4. FEI Number

65-0902639

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

ALEJANDRO QUINTA

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

7925 N.W. 12TH ST

SUITE 318

City

MIAMI

FL

Zip Code

33126

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Alejandro N. Quintana*

Signature, typed or printed name of registered agent, if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

7100009704867  
12/27/02-01008-001 \*\*150.00

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is: \$150.00

After May 1, Fee is: \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PVT  
ALEJANDRO QUINTA  
7925 N.W. 12TH ST SUITE 318  
MIAMI, FL 33126

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Alejandro N. Quintana*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034B (12/01)

A Q QUALITY DISTRIBUTORS, INC  
7925 NW 12 STREET  
SUITE 318  
MIAMI, FL 33126

SECRETARY OF STATE

December 20, 2002

Ref: P99000006316  
Annual Report

Dear Sir/Madam:

Please be advised that we have never received our annual report and we need to renew our corporation, please if you could check your records because we need you to take into consideration that the economic crisis our country is going through it has not been the easiest at all and we need your help with all the small businesses.

Thank your for your understanding.

Cordially,

  
Alejandro Quinta  
President

*Thank you  
Herry  
X-MAS.*