

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90002 012 \*\*\*150.00

DOCUMENT # P99000019929

1. Entity Name

QUALITY METERING, INC.

Principal Place of Business

Mailing Address

13291-S.W. 17th LANE #5  
MIAMI, FL 33175

13291-S.W. 17th LANE #5  
MIAMI, FL 33175

LD0067851

2. Principal Place of Business

117-GARDENS DRIVE

3. Mailing Address

117-GARDENS DRIVE

Suite, Apt. #, etc.

#103

Suite, Apt. #, etc.

#103

DO NOT WRITE IN THIS SPACE

City & State

POMPANO BEACH

City & State

POMPANO BEACH

4. FEI Number

65-0898321

Applied For

Not Applicable

Zip

33069

Country

USA

Zip

33069

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

EDUARDO M. OLEA

13291-S.W. 17th LANE #5  
MIAMI, FL 33175

7. Name and Address of New Registered Agent

Name

LUIS A. RIVERA, JR.

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

117-GARDENS DRIVE # 103

City

POMPANO BEACH

FL

Zip Code

33069

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 PD LUIS A. RIVERA, JR. ☐ Delete  
NAME  
STREET ADDRESS 8265-N.W 186th ST. UNIT 901  
CITY-ST-ZIP MIAMI, FL 33015

TITLE VD EDUARDO M. OLEA ☒ Delete  
NAME  
STREET ADDRESS 13291-S.W. 17th LANE #5  
CITY-ST-ZIP MIAMI, FL 33175

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST LUIS A. RIVERA, JR. ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 117-GARDENS DRIVE #103  
CITY-ST-ZIP POMPANO BEACH, FL 33069

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Luis A. Rivera 3-15-00 954-346-7285