

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90048 039 ***150.00

DOCUMENT # L33107

1. Entity Name
QED ENGINEERING, INC.

Principal Place of Business
~~3901 SW 47 AVE STE 402~~ **1318 SE 2ND AVE**
FT LAUDERDALE FL 33314
US

Mailing Address
~~3901 SW 47 AVE STE 402~~ **1318 SE 2ND AVE**
FT LAUDERDALE FL 33314
US

00000001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1318 SE 2nd Ave
 Suite, Apt. #, etc.

3. Mailing Address
1318 SE 2nd Ave
 Suite, Apt. #, etc.

City & State
FT. Laud FL

City & State
FT. Laud FL

4. FEI Number **59-1654497**
 Applied For
 Not Applicable

Zip Country
33316 Broward

Zip Country
33316 Broward

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BROWN, JOHN H
3901 S W 47TH AVE
402
FT LAUDERDALE FL 33312

7. Name and Address of New Registered Agent
 Name **ARTHUR H. GREENBERG**
 Street Address (P.O. Box Number is Not Acceptable)
1318 SE 2ND AVE
 City **FT. LAUDERDALE FL** Zip Code **33316**

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 DATE **4/10/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP GREENBERG, ARTHUR H. 7241 SW 6TH ST PLANTATION FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT BROWN, JOHN H 5 MENDOTO LANE SEA RANCH LAKES FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**
 Date _____ Daytime Phone # _____

FILED

CR2E034 (10/00)