## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

## L33107 DOCUMENT #

1. Entity Name

QED ENGINEERING, INC.



Principal Place of Business Mailing Address 1318 SE 2ND AVE 1318 SE 2ND AVE FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-1654497 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREENBERG, ARTHUR H Street Address (P.O. Box Number is Not Acceptable) 1318 SE 2ND AVE FORT LAUDERDALE FL 33316 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition Delete TITLE Change GREENBERG, ARTHUR H. NAME NAME 241 SW6 STREET ADDRESS 7241 SW 6TH ST STREET ADDRESS PLANTATION FL CITY-ST-7IP CITY-ST-ZIP ONTOTION *3*3317 TITLE ☐ Delete TITLE ☐ Change NG.GUMPE NAME NAME 1911 SW85TH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete TITLE Change Addition JOAN GREENBERG NAME NAME 241 SW 6 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE □ Delete TITLE Change \_\_ Addition NAME NAME STREET ADDRESS STREET ADDRESS

**FILED** Mar 31, 2003 8:00 am §
Secretary of State

03-31-2003 90918 039 \*\*\*150.00

CR2E034 (10/02)

12. 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 empowers to secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**MEWUINESIN** NTED NAME OF SIGNING OFFICER OR DIRECTOR