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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name L83455

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MICO	DALLETION	OVOTERIO	DECION	<b>Λ</b> Ε	OTHERT	11.10
INFU	HMA HUN	SYSTEMS	DESIGN !	Ut.	STUART	INC.

		0. 0.	,							
Principal Place of Business			Mailing Address				Alli Dibil Bibil	CHIH CIDI	<b>     </b>	
% JOHN K. QUICK 370 N.W. ALICE AVENUE STUART FL 34994		37	% JOHN K. QUICK 370 N.W. ALICE AVENUE STUART FL 34994			3. Date incorporated or Qualified 3a. Date of Last Report 06/27/1990 05/01/1995				
- D	(P)-:		4-2				06/27/1990 4. FEI Number		<u>/U 1/ 19</u>	
2. Principal Pla 21	Ce of Business	2a. 1 26	Vailing Address				65-0205840			Applied For Not Applicable
Suite, Apt. #	e, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State		28	Oity & State				Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees
Zip Country		Ž	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	9. Name and Address of Curr	29	rad Apont	30			Florida Statutes Yes  10. Name and Address of New R		i aant	
	9. Name and Address of Curr	em negiste	red Agent		ijŢ	Name	10. Name and Address of New N	egistereu A	igeni	
QUICK, J	IOHN K.			B	2	Street Addre	ess (P.O. Box Number is Not Acceptab	(a)		
517 NE 40TH AVE.						—————		<del>-</del> ,		
OCALA F	FL 32671			8	13					
				8	14	City		FI	85 Z	Zip Code
11. Pursuant to	o the provisions of Sections 607.05	02 and 607.	1508, Florida Statut	tes, the above	na ma	arned corpora	ation submits this statement for the pur d of directors. Thereby accept the appo	pose of cha	 nging its registere	registered office
familiar with	h, and accept the obligations of, Sa	ection 607.05	005, Flor da Statute	S			, , , , , , , , , , , , , , , , , , , ,		-3	
SIGNATURE .	Signature, typertion protect came of registers that	ortansista, stapa	, a value	Mr. Bay town Ap	p = f =	Signature to proced	Living reserving	FIATs .		
12.	OFFICERS A	NO DIRECT	ORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECT	ORS IN 12
THILE	D		DELETE	1.1 ]([[	E				] Change	Addition
NAME	QUICK, JOHN K.			1.2 NAMI						
STREET ADDRESS	517 NE 40TH AVE.			13 STRE						
CHTY - ST - ZIP TITLE	OCALA FL		□ DELETE	14 City 2 + 10th	· · · · · · · · · · · · · · · · · · ·	- 719		···	7 Change	Addition
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STREET ADDRESS				2.3.STRE		CORESS				
CHTY-ST-ZIP				24 017 Y						
TITLE			☐ DELETE	3 1 TITL					] Change	Addition
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CITY - ST - ZIP				3.4 GHY	· ST	- 71P				
TITLE			DETELE	4 1 TITL	Ŀ				] Change	Add tion
NAME				4.2 NAM	E					
STREET ADORESS				4.3.STRE	ET A	CODRESS				
C(TY - ST - Z(P			Fil bout at	4.4 CITY		- ZIP			7 ( )	ED Maria
TITLE			DELETE	5.1105				L.	] Change	Addition
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STREET ADDRESS				5 3 STRE						
CITY-S1-ZIP TITLE	The second secon		DELETE	5.4 CHY 6.1 TH)		Z)P'			Change	Add tion
NAME			L.J DECETE	6.2 NAM				L	T ousuble	
STREET ADDRESS				6.3 S*RE		IDDBESS				
CITY-ST-ZIP				64 CITY						
14. I do hereby	y certify that the information supplie	d with this fi	ling is voluntarily fur	nished and oc	oes	not qualify fo	or the exemption stated in Section 119.	07(3)(k), Flor	da Stati	utes. I further
certify that oath, that I	the information indicated on this ar	mual report a poration or t	or supplemental and the receiver or truste	riual report is t ee empowered	truc	and a curat	te and that my signature shall have the s report as required by Chapter 607, Fli	same legal (	effect as	if made under

SIGNATURE:

MINTED NAME OF SIGNING OFFICER OR DIRECTOR K Quina

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