

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000067446 (1)

1. Corporation Name
Q-1 TECHNOLOGIES, INC.



Principal Place of Business 2550 118TH AVENUE NORTH ST. PETERSBURG FL 33716		Mailing Address 2550 118TH AVENUE NORTH ST. PETERSBURG FL 33716 C/O Ann E. Pointer, Ess. 13535 Feather Sound Drive Suite 327, Clearwater FL 34622		3. Date Incorporated or Qualified 08/31/1995	3a. Date of Last Report N/A
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-3336063	Applied For Not Applicable		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
City & State 23	City & State 28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Zip 24	Country 25	Zip 29	Country 30		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**POINTER, ANN E
13535 FEATHER SOUND DRIVE
SUITE 327
CLEARWATER FL 34622**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and their appointor

(Initials of Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE CD	GALINSKI, MICHAEL B CHAIRMAN 13535 FEATHER SOUND DR. #327 CLEARWATER FL 34622	<input type="checkbox"/> DELETE	1.1 TITLE DICED <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GALINSKI, MICHAEL B			1.2 NAME Galinski, Michael B.
STREET ADDRESS 13535 FEATHER SOUND DR. #327			1.3 STREET ADDRESS
CITY-ST-ZIP CLEARWATER FL 34622			1.4 CITY-ST-ZIP
TITLE PD	GIAMMARRUSCO, JOSEPH 13535 FEATHER SOUND DR. #327 CLEARWATER FL 34622	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GIAMMARRUSCO, JOSEPH			2.2 NAME
STREET ADDRESS 13535 FEATHER SOUND DR. #327			2.3 STREET ADDRESS
CITY-ST-ZIP CLEARWATER FL 34622			2.4 CITY-ST-ZIP
TITLE VD	ROGERS, ARIS 13535 FEATHER SOUND DR. #327 CLEARWATER FL 34622	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROGERS, ARIS			3.2 NAME
STREET ADDRESS 13535 FEATHER SOUND DR. #327			3.3 STREET ADDRESS
CITY-ST-ZIP CLEARWATER FL 34622			3.4 CITY-ST-ZIP
TITLE TD	HALL, GREG 13535 FEATHER SOUND DR. #327 CLEARWATER FL 34622	<input type="checkbox"/> DELETE	4.1 TITLE T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HALL, GREG			4.2 NAME
STREET ADDRESS 13535 FEATHER SOUND DR. #327			4.3 STREET ADDRESS
CITY-ST-ZIP CLEARWATER FL 34622			4.4 CITY-ST-ZIP
TITLE S	POINTER, ANN E 13535 FEATHER SOUND DR. #327 CLEARWATER FL 34622	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME POINTER, ANN E			5.2 NAME
STREET ADDRESS 13535 FEATHER SOUND DR. #327			5.3 STREET ADDRESS
CITY-ST-ZIP CLEARWATER FL 34622			5.4 CITY-ST-ZIP
TITLE EX-V	MARTENS, MARK 2550 118TH AVENUE N. ST. PETERSBURG FL 33716	<input checked="" type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MARTENS, MARK			6.2 NAME
STREET ADDRESS 2550 118TH AVENUE N.			6.3 STREET ADDRESS
CITY-ST-ZIP ST. PETERSBURG FL 33716			6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Ann E Pointer* **Ann E. Pointer** 4/23/96 813-573-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)