

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P95000067446 (1)
 1. Corporation Name
Q-1 TECHNOLOGIES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**2550 118TH AVENUE NORTH
 ST. PETERSBURG FL 33716**

Mailing Address
~~C/O POINTER, ANN. E. 590.
 13535 FEATHER SOUND DRIVE, SUITE 327
 CLEARWATER FL 34622
 US~~
**D. Michael Pointer II
 c/o Pointer, D. Michael II**

2. Principal Place of Business
 21 Suite, Apt #, etc.
 22 City & State
 23 Zip Country
 24 25

2a. Mailing Address
 26 **2550 118th Avenue North**
 Suite, Apt #, etc.
 27 City & State
 28 **St. Petersburg, FL 33716**
 Zip Country
 29 **33716** 30 **USA**

3. Date Incorporated or Qualified
08/31/1995

4. FEI Number
59-3336063

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

g. Name and Address of Current Registered Agent
**POINTER, D. MICHAEL II
 2550 118TH AVENUE NORTH
 ST. PETERSBURG FL 33716**

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DCEO	<input type="checkbox"/> DELETE
NAME	GALINSKI, MICHAEL B	
STREET ADDRESS	13535 FEATHER SOUND DR. #327	
CITY-ST-ZIP	CLEARWATER FL 34622	
TITLE	HALL, OREG B	<input checked="" type="checkbox"/> DELETE
NAME	13535 FEATHER SOUND DR. #327	
STREET ADDRESS	CLEARWATER FL	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	POINTER, ANNE	<input checked="" type="checkbox"/> DELETE
NAME	13535 FEATHER SOUND DR. #327	
STREET ADDRESS	CLEARWATER FL	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

see zip code

2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

**Pointer, D. Michael II
 2550 118th Avenue North
 St. Petersburg, FL 33716**

Change Addition

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

**500002527015
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 ***158.75**

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE *D. Michael Pointer II*

CR2E034 (10/97)