2001 UNIFORM BUSINESS REPORT-(UBR)

FILED Jan 26, 2001 8:00 am Secretary of State DOCUMENT # **P94000070939** QUEST INTERNATIONAL, INC. 01-26-2001 90073 025 ***150.00 Principal Place of Business Mailing Address 1938 NE 148 TERR 1938 NE 148 TERR NO MIAMI FL 33181 NO. MIAMI FL 33181 704426 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0522334 Not Applicable Zip Country 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 Name CORT. ROBERT Street Address (P.O. Box Number is Not Acceptable) 1938 NE 138 TERR 148 TERE NO. MIAMI FL 33181 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. Jan. 15, 2001 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE TITLE ☐ Addition Delete NAME CORT, ROBERT A NAME STREET ADDRESS STREET ADDRESS 3271 SW 53 ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33312 ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME KIEFER, DAVID J NAME STREET ADDRESS STREET ADDRESS 828 LAKE DRIVE CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL 33166 TITLE Delete TITI F Change ☐ Addition TROY, SANDRA NAME NAME STREET ADDRESS STREET ADDRESS 2320 N.E. 215TH ST. CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI FL 33180 TITLE ☐ Delete TITLE ☐ Change ☐ Addition COMPAIN, OSCAR NAME NAME STREET ADDRESS STREET ADDRESS 6861 SW 95 AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Jan. 15, 2001 948-8788