

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 20 PM 2:26

DOCUMENT # 333165

(9)

1. Corporation Name

QSR, INC.

Principal Place of Business

**6300 N.W. 31ST AVENUE
FT. LAUDERDALE FL 33309**

Mailing Address

**6300 N.W. 31ST AVENUE
FT. LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/29/1968

3a. Date of Last Report

04/29/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-1407163

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

KX

**\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing

Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**ECONOMOU, CHRIS A
6300 N.W. 31ST AVENUE
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81. Name

Frank M. Puthoff

82. Street Address (P.O. Box Number is Not Acceptable)

6300 NW 31 Avenue

83.

84. City

Fort Lauderdale

FL

85. Zip Code

33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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. Each 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

Frank M. Puthoff

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

FERLYN, DONALD

STREET ADDRESS

6300 NW 31ST AVENUE

CITY-ST-ZIP

FT. LAUDERDALE FL

TITLE

DP

NAME

RUSO, THOMAS J.

STREET ADDRESS

6300 NW 31ST AVENUE

CITY-ST-ZIP

FT. LAUDERDALE FL 33309

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President/Director

☒ Change ☐ Addition

1.2 NAME

Thomas J. Russo

1.3 STREET ADDRESS

6300 NW 31 Avenue

1.4 CITY-ST-ZIP

Fort Lauderdale, FL 33309

2.1 TITLE

VP/Treasurer/D

☒ Change ☐ Addition

2.2 NAME

Jerry W. Woda

2.3 STREET ADDRESS

6300 NW 31 Avenue

2.4 CITY-ST-ZIP

Fort Lauderdale, FL 33309

3.1 TITLE

VP/Secretary/D

☐ Change ☒ Addition

3.2 NAME

Frank M. Puthoff

3.3 STREET ADDRESS

6300 NW 31 Avenue

3.4 CITY-ST-ZIP

Fort Lauderdale, FL 33309

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 110.07(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 recorder or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank M. Puthoff, VP/Secretary

Date

Daytime Phone #