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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 347656

(1)

QUARLES ENTERPRISES INC

FILED Apr 15 1998 8:00am Secretary of State

Principal Place of Business \$88\$ 49TH ST NORTH \$5. PETERSBURG FL 33709-2111 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified \$6/10/1969 2. Principal Place of Business 2a. Mailing Address 2a. Mailing Address 4. FEI Number Col/10/1969 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applies Sulte, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Addit Fee Requir City & State City & State City & State 3. Date Incorporated or Qualified 6/10/1969 4. FEI Number Applies Sulte, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Addit Fee Requir Trust Fund Contribution Added to Fe \$5.00 May A	For olicable
ST. PETERSBURG FL 33709-2111 ST. PETERSBURG FL 33709-2111 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified O6/10/1969 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1267492 Not Applie Suite, Apt. #, etc. 5. Certificate of Status Desired Fe Required Fee Required City & State City & State City & State 28 Country 29 29 30 Country 30 9. Name and Address of Current Registered Agent QUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 81 Name City & State City & State City & Country Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Added to Fe Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Address (P.O. Box Number is Not Acceptable) 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 reg office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered by the corporation's board of directors. Thereby accept the appoprintment as registered.	
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28. Mailing Address 29. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country 29. Name and Address of Current Registered Agent QUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 21. Principal Place of Business 22. Mailing Address 24. FEI Number 59-1267492 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Requir 6. Election Campaign Financing Trust Fund Contribution Trus	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	olicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	
Trust Fund Contribution Added to Fe Zip Country Zip Country 25 29 30 Personal Property Tax due June 30. Yes No. QUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 81 Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) B2 Street Address (P.O. Box Number is Not Acceptable) B3 City AGO 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reconfice 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.	
Zip Country Zip Country Sip Country Sip Country Sip Country Sip Sip Country Sip	
25 29 30 Personal Property Tax due June 30. Yes No. 9. Name and Address of Current Registered Agent OUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 81 Name BORA A Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL 84 City City FL 85 Zip Code FL 3 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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.	
QUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 81 Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83	
QUARLES, WILLIAM E 10398 112TH ST NO LARGO FL 33778 81 Name BORA A L. Quartes Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83	
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agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.	stered tered
SIGNATURE Signature, typed or printed name of registered agent arginated if applicable. (NCITE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
	Addition
NAME QUARLES, DEBORAH L 12 NAME	l
STREET ADDRESS 11001 105TH AVE N 1.3 STREET ADDRESS	
CITY-ST-ZIP LARGO FL 1.4 CITY-S1-ZIP	
	Addition
NAME JOHNSON, ROBERT H JR 2.2 NAME	į
STREET ADDRESS 12510 QUEENSLAND LANE 2.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL 2.4 CITY-ST-ZIP TITLE D DELETE 3.1 TITLE Change	Addition
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	Addition
NAME 4.2 NAME	
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	Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	ļ
CITY-ST-ZIP 5.4 CITY-S1-ZIP	
TITLE DELETE 6.1 TITLE Change	Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14 Thereby certify the the intermedian supplied with the filtre does not quality for the asympton stated in Section 119 07/3V(). Florida Statutes I further certify that the info	
14. Thereby 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 info 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 a officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appear Block 12 or Block 13 if changed, or on an attachment of the receiver or trusted empowers.	