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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 553568

MICRO QUALITY CORPORATION

FILED Feb 17, 1999 8:00am **Secretary of State**

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		Moiting Address			1 100101 01101 01100 11101			
			Mailing Address					
1101 S ROGERS CR. STE 13 1101 S ROGERS CR. STI BOCA RATON FL 33487 BOCA RATON FL 33487		13		•				
		BOCA RATON FL 33407			DO NOT WRITE IN THIS SPACE			
					Date Incorporated or Qualifold	ed		l
					09/21/1977			
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For
	acc of Business	26		59-1763066		Not	Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Ad		
	<i>"</i> , ειο.	27		•	5, Certificate of Status Desired	نسيحيت كالعبديا	Fee Req	juired -
City & State		City & State		6, 'Election Campaign Financin	ng .□	\$5.00 N	√lay Be	
-, '		28		Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Count	try	8. This corporation owes the o	current year Intang	jible	_ :-
→ ·	25	29	30		Personal Property Tax.		Yes	□No
24	9. Name and Address of Curren		T		10. Name and Address of Ne	w Registered Age	ent :	_: :
	9, Name and Address of Carron		8	81 Name				•
STETTLER, RALPH 3195 EQUESTRIAN DRIVE/WOODFIELD HUNT CLUB					(D.O. Bay Northania Nat Acco	antable)		
			82 Street Ac		ddress (P.O. Box Number is Not Acceptable)			
		1	83	· · · · · · · · · · · · · · · · · · ·	- 101,5 (4.75)	1 w (15)	1 24 3	
	CA RATON, FL					ng P. B. M. C.		
3343	3 4		ļ.	84 City	કે ક	EI .	85 Zip C	odé
						the summan of obs	pogina ite I	rogistered .
	to the provisions of Sections 607.050 registered agent, or both, in the State				ion's board of directors. I hereby ac	cept the appointm	ent as reg	jistered l
agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	itions of, Section 607.0505, Flo	orida Statut	tes.				
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered age			Agent signature requir	ADDITIONS/CHANGES TO	DATE OFFICERS AND	DIRECTO	RS IN 12
12		ND DIRECTORS	13.				Change	Addition
TITLE	SM	☐ DELETE	1.1 TITI.			_		
NAME	Stettler, ralph		1.2 NA					
STREET ADDRESS	3195 EQUESTRIAN DRIVE		1.3 STF	REET ADORESS				,
CITY-ST-ZIP	BOCA RATON, FL 33434		1.4 CIT	Y-ST-ZIP			Change	Addition
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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, with all other like empowered.

SIGNATURE: