FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FII FI) DOCUMENT # FOIDOODO1439 1. Entity Name 02 OCT 29 AMII: 38 QUALITY KING DISTRIBUTORS, INC. SECHETARY OF STATE TĂLLAHASSEE FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Plage of Business 3. Mailing Address 2060 NINTH AVENUE 2060 NINTH AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State RONKONKOMA, NY City & State 4. FEI Number Applied For RÓNKONKOMA, NY 11-1973001 Not Applicable Zip 11779 Country Zip 11779 Country USA \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 7. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1200 SOUTH PINE ISLAND ROAD City PLANTATION, Zip Code 33324 FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150,00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE TITLÉ CR2E034B (12/01) NAME GLENN NUSSDORF NAME STREET ADDRESS STREET ADDRESS 2060 NINTH AVENUE RONKONKOMA, NY CITY-ST-ZIP CITY-ST-ZIP 11779 TITLE VD TITLE 500008686665 NAME STEPHEN NUSSDORF NAME 10/30/02-01015-008 **158.75 STREET ADDRESS STREET ADDRESS 2060 NINTH AVENUE RONKONKOMA, NY CITY-ST-ZIP CITY-ST-ZIP 11779 TITLE STD TITLE NAME NAME ARLENE NUSSDORF STREET ADORESS STREET ADDRESS 2060 NINTH AVENUE RONKONKOMA, NY DO NOT WRITE CITY- ST- ZE CITY-ST-ZIP TITLE THLE IN THIS SPACE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIFLE MAME NAME STREET ADORÉSS STREET ADDRESS CITY-STAIP * CITY-ST-7P TITLE THE NAME 🐧 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dave

Daytime Phone #



October 22, 2002

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Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Quality King Distributors, Inc. For Profit Uniform Business Report

Dear Sir or Madam:

We recently received a Notice of Administrative Dissolution or Revocation package. Based on our conversation with your office we were instructed to submit a Uniform Business Report instead of signing and submitting the Application for Reinstatement as provided in the package.

We did not receive the original application for renewal of the Uniform Business Report and as a result never filed it by the due date of May 1, 2002. Had we received the report and or had known of this filing requirement we would have timely filed the report.

Quality King Distributors, Inc. prides itself on always filing all required tax and information reports on a timely basis. We sincerely apologize for this oversight and will make sure that this late filing will not happen again.

Enclosed is a fully executed For Profit Corporation Uniform Business Report (UBR) along with a check in the amount of \$158.75.

If you have any questions please do not hesitate to contact me at (631) 439-2276. Thank you for your time and understanding in this matter.

Yours truly,

Fred Pignataro

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IN PAYMENT OF THE ABOVE INVOICES
PLEASE DETACH BEFORE DEPOSITION

QUALITY KING DISTRIBUTORS INCORPORATED