

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000004051

FILED
Oct 07, 2004
Secretary of State

Entity Name: QMS INFORMATION TECHNOLOGIES, INC.

Current Principal Place of Business:

1580 SAWGRASS CORPORATE PARKWAY, SUITE 130
SUNRISE, FL 33323

New Principal Place of Business:

1580 SAWGRASS CORPORATE PARKWAY
SUITE 130
SUNRISE, FL 33323

Current Mailing Address:

1580 SAWGRASS CORPORATE PARKWAY, SUITE 130
SUNRISE, FL 33323

New Mailing Address:

1580 SAWGRASS CORPORATE PARKWAY
SUITE 130
SUNRISE, FL 33323

FEI Number: 88-0381660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMSDEN, KELLY WOODRING
1580 SAWGRASS CORPORATE PARKWAY, STE 130
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

RAMSDEN, KELLY WOODRING
1580 SAWGRASS CORPORATE PARKWAY
SUITE 130
SUNRISE, FL 33323 US

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: KELLY WOODRING RAMSDEN

10/07/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: MERWIN, CARMEN O
Address: 13384 NW 7TH STREET
City-St-Zip: PLANTATION, FL 33325

Title: STVC () Delete
Name: MERWIN, OLIVER J
Address: 13384 NW 7TH STREET
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MERWIN, CARMEN O
Address: 13384 NW 7TH STREET
City-St-Zip: PLANTATION, FL 33325

Title: STD (X) Change () Addition
Name: MERWIN, OLIVER J
Address: 13384 NW 7TH STREET
City-St-Zip: PLANTATION, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLIVER J MERWIN

S

10/07/2004

Electronic Signature of Signing Officer or Director

Date