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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

F9400006441 (9)

FELDMAN/QUANTUM ORLANDO CORP.

FILED Apr 29 1996 8:00 am Secretary of State

Principal Place	of Business	Mailing Addre	ess					1410 MI131 AIR	(1 5165) (151 (45)
% FELDMAN			% FELDMAN EQUITIES 120 W. 45TH ST. NEW YORK NY 10036						
120 W. 45TH NEW YORK I									
THE IT I CHIN I	11 19999	14611 10111	111 10000			3. Date Incorporated or Qualified	i	of Last F	•
						12/16/1994	0	6/20/19	
	ace of Business	2a. Mai'ing Ad	idress			4. FEI Number		-	Applied For
Suite, Apt. #	N oto	[26]	t olo			58-2158521			Not Applicable
22	w, etc.	Suite, Apt	. #, 0 10.			5. Certificate of Status Desired			5 Additionat Required
City & State		City & Sta	 te			6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	C	country	,	8. This corporation has liability fo	r intangible ta		
24	25	29	30			Florida Statutes 🔲 Ye	s ∐ No		
	Name and Address of Current	nt Registered Age	nt		•	10. Name and Address of New	Registered	Agent	
				81	Name				
THE PRE	ENTICE-HALL CORPORATION ST	YSTEM, INC.		82	Street Add	ress (P.O. Box Number is Not Accepta	ıble)		
1201 HA			1 11-2-		22007.100	Addition to the Property of			
SUITE 1			83						
	ASSEE FL 32301				City	- 85 Zip Code			
				84	Uniy		FŁ	63 2	ib Code
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Sect	da. Such change w	as authorized by th	ipicod ipicod	named corpo oration's boa	ration submits this statement for the pi ard of directors. Thereby accept the ap	urpose of cha pointment as	anging its registered	registered office d agent. I am
SIGNATURE	, ,	·							
	Signature, typed or prices same of relieved agost OFFICERS AN		· · · · · · · · · · · · · · · · · · ·		of Signature require	ad wher readstate gi	DATE	SIDEOTO	SDC IN 40
12.	PD -		treat or more en	3. 1 TIFLE		ADDITIONS/CHANGES TO OF		Change	Addition
NAME	; -	L) (2 NAME			ι	_) Ghangs	L] Addition
STREET ADDRESS	FELDMAN, LAWRENCE 520 MADISON AVE.				LADORESS				
CITY-ST-ZIP	NEW YORK NY 10036								
T:TLE	VD	····		4 CITY - S 1 TITLE	31-21-			7 Change	Addition
NAME	CHAZEN, LEONARD			2 NAME					
STREET ADDRESS	520 MADISON AVE.				T ADDRESS				
DITY-ST-ZIP	NEW YORK NY 10036			4 CITY - S					
TITLE	VSAT	····		1 [1], [31-211			Change	Addition
NAME	DELEONARDO, ANTHONY			2 NAME			•	5.	
STREET ADDRESS	520 MADISON AVE.				: ADDRESS				
CITY-ST-ZIP	NEW YORK NY 10036			4 CHY - 5					
TITLE	VTAS			1 III.E	-			Change	Addition
NAME	KARP, DAVID A	_	4.:	2 NAMÉ			_	-	_
STREET ADDRESS	520 MADISON AVE.		4:	3 STEEF	LADORESS				
CITY-ST-ZIP	NEW YORK NY 10036		1	4 CHTY - 5					
TITLE	D			1 111. E				Change	Addition
NAME	SCHWARTZ, VERNON B			2 NAME					
STREET ADDRESS	520 MADISON AVE.		5	3 STFEE	T ADORESS				
CITY-ST-ZIP	NEW YORK NY 10036			4 CITY - 3					
TITLE				1 TITLE				Change	Addition
NAME			6:	2 NAME			_		
STREET ADDRESS			•		ADDRESS				
CITY-ST-ZIP				4 GHTY - 5					
	y certify that the information supplied	with this filing is volu				for the exemption stated in Section 11s	9.07(3)(k), Flo	rida Statu	tes. I further

certify that the information indicated on this annual report is 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 reporter 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 attacting or with an address

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR I MUPENIE CELOMAN

Div 210-768-9010