## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08 \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F95000005512 (7)

QAI, INC.

FILED Sep 24 1998 8:00am Secretary of State

Principal Plac	e of Business	Malling Address			I LOBIIDE ALLO IDEDI DIVIS BOUN DDIN	n dagan dagan ganda ganga danga sadas sada sada
386 N. WABAS		386 N. WABASHA		1		
1550		1550				
ST PAUL MN 55102		ST. PAUL MN 55102			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified 11/13/1995	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26 7700 Invine	- Center Dri	//e-	41-1709144	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · ·			\$8.75 Additional
22		27 605			5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State	01		6. Election Campaign Financing	\$5.00 May Be
23		سعدان مسلم [28]	CA		Trust Fund Contribution	Added to Fees
Zip 24	Country	29 97618	Country SA	.	8. This corporation owes or has pa	r-1 - r-1 -
[24]	9. Name and Address of Current I		1301		Personal Property Tax due June	
9. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM  81 Name  B1 Name						
1200 COLITH DINE ICLAND DOAD						
PLANTATION FL 33324				t Address	(P.O. Box Number Is Not Acceptab	ole)
83						
			0.0			
			84 City			FL 85 Zip Code
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 registered						
office 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 agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if menhaphia	DTE: Registered Agent eignal			DATE
12.	OFFICERS AND		13.	iura requiraci	ADDITIONS/CHANGES TO OFFI	······
TITLE	PC	X DELETE	1.1 TITLE	P	7,557,610,610,110,55 10 011	Change X Addition
NAME	Baer, Elam	Q a second	1.2 NAME	1 *	d Wiegond	One lige Addition
STREET ADDRESS	386 N. WABASHA, SUITE 1550		1.3 STREET ADDRESS	106	22 Villa Del Cerro	
CITY-ST-ZIP	ST. PAUL MN		1.4 CITY-ST-ZIP	Sax		5
THLE	VCS	X DELETE	2.1 TITLE	S		Change Addition
NAME	GRUNSETH, VICTORIA	• "	2.2 NAME	Have	a Wicopub	
STREET ADDRESS	386 N. WABASHA, SUITE 1550		2.3 STREET ADDRESS		z Villa DelCervo	ļ
CITY-ST-ZIP	ST. PAUL MN		2.4 CITY-ST-ZIP	San	ta Ana CA 92705	
TITLE	D ODECN ICCC	🔀 DELETE	3.1 TITLE	D	A. 1 O	Change 🔀 Addition
NAME	GREEN, JEFF		3.2 NAME	Geor	ge Rebendont	three Soxtebos
STREET ADDRESS	386 N. WABASHA, SUITE 1550		3.3 STREET ADDRESS	1700	stroing course	Made Son Coos
CITY-ST-ZIP	SIOUX FALLS SD		3.4 CITY-ST-ZIP	4	ine ut 74018	
TITLE	LONGLEY, CHRIS	DELETE	4.1 TITLE	<b>V</b>	Shade	Change Addition
NAME STORES ADDOCSS	388 N WABASHA, STE 1550		4.2 NAME	FOW	TANA CARTERADA	We Soft Gos
STREET ADDRESS	ST PAUL MN		4.3 STREET ADDRESS	1100	Turne Center Dr Ine CA 92618	will 100
CITY-ST-ZIP TITLE	D	Vocation	4.4 CITY-ST-ZIP 5.1 TITLE	بهبد	ine CA 12018	
NAME	DENINIS, JOHN	X DELETE	5.2 NAME			Change Addition
STREET ADDRESS	386 N WABASHA, STE 1550		5.3 STREET ADDRESS			
CITY-ST-ZIP	ST PAUL MN		5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	<del>                                     </del>		Change Addition
NAME		L.J DEGETÉ	6.2 NAME			ا Change ريا Accition بيا
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-\$1-ZIP			6.4 CITY-ST-ZIP			
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 on 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.						

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