## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600001618 (5)

QUATRINE FURNITURE OF FLORIDA, INC.

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168	8 W	000	WA	RD	,
BIRI	UING	HAH	М	48	m



Principal Place of Business Mailing		failing Address				1	1 (881188 1118 18118 \$1411 \$	1691 <b>W</b> WILL <b>28</b> 161	98111 98681 11 <b>9</b> 19	#11#1		
68 & Woodward Birmingham Mi <b>480</b> 09		168 \$ WOODWARD BIRMINGHAM MI 48009										
							DO NOT WRITE IN THIS SPACE					
							3.	Date Incorporated or	Qualified	3a. Date o	f Las	st Report
							ſ	03/28/1996				
. Principal Plac	e of Business	28	. Mailing Address					FEI Number		<del></del>	Γ	Applied For
i]		26				١.	ARRMED/FOR	38-32	96501		Not Applicable	
Suite, Apt. #, etc.			Suite, Apl. #, etc.		5.	Certificate of Status D	esired	□ \$		5 Additional		
2		27	<u> </u>			ļ				Fee	Required	
City & State			City & State		6.	Election Campaign Fir	nancing	{	\$5.0	DO May Be		
B <u></u>		28	4			<u> </u>	Trust Fund Contribution	n	<u> </u>	Add	ed to Fees	
Zip n	Country	ļ <sub>1</sub>	Zip	Cou	ntry		8.	This corporation owes				
<u> </u>	25	[29]		30			1	Personal Property Tax				X No
					10. Name and Address of New Registered Agent							
	SR, WILLIAM R				81	Name						
13900 STIRLING ROAD FT LAUDERDALE FL 33330				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)						
					83							
					84	City		<u> </u>		FL 8	j Z	ip Code
office or real	he provisions of Sections 607.05 stered agent, or both, in the Stal amiliar with, and accept the obli	le of Flor	ida. Such change was a	authorize	d by	the corporation	oration on's b	n submits this statemer oard of directors. I her	nt for the pu eby accept	rpose of cha the appointr	ngin nent	g its registered as registered
SIGNATURE										<u></u>		
				1 Age	nt signature required				DATE			
12. OFFICERS AND DIRECTORS 13						- 4	DDITIONS/CHANGES	TO OFFICE	-RS AND DIE	a⊢t:T	IDBS IN 12	

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								
12.	Signature, typed or printed name of registrated agent and title if applicable OFFICERS AND DIRECTORS	(NOTE: B	egistered Agent signature 13.	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
	PDT DE	ETE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE		L.R.I.C.	1.1 Tille	_ , _				
NAME	ELLIS JR, WILLIAM R		1.2 NAME	9000023212393				
STREET ADDRESS	168 S WOODWARD		1.3 STREET ADDRESS	-10/15/9701092001				
CITY-ST-ZIP	BIRMINGHAM MI		1.4 CITY - ST - ZIP	****165.00 <u>*****165.00</u> Change Addition				
TITLE	_	LETE	2 1 TITLE	Change Addition				
NAME	ELLIS, VIRGINIA C		2.2 NAME					
STREET ADDRESS	168 S WOODWARD		2.3 STREET ADDRESS					
CITY-ST-ZIP	BIRMINGHAM MI		2. 4 CITY - ST - ZIP					
TITLE	□ DE	ETE	3.1 TITLE	Change Addition				
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY - ST - ZIP					
TITLE 🐧	Dt.	LETE	4.1 TITLE	Change Addition				
NAME			4 2 NAME					
STREET ADDRESS			4.3 STHEET ADDRESS					
CITY-ST-ZIP			44 CITY - ST - ZIP					
TITLE	DE	LETE	5.1 TITLE	Change Addition				
NAME			5.2 NAME					
STREET ADORESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY - ST - ZIP					
TITLE	□ DE	LETE	6.1 111LF	Change Addition				
NAME			6.2 NAME	$\wedge$				
STREET ADDRESS			6.3 STREET ADDRESS	$\Delta^{\circ}$				
CITY-ST-ZIP			6.4 CITY-ST-ZIP	<u> </u>				

14. I do 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 of the receiver or frustoc 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 given attachment with an address.

SIGNATURE:





August 28, 1997

Division of Corporations Annual Reports Section P.O. Box 6327 Tallahassee, FL 32314-6327

RE:

QUATRINE FURNITURE OF FLORIDA, INC. 1997 ANNUAL REPORT #F96000001618

Dear Sir/Madam:

We are writing to you on behalf of our above mentioned client regarding the attached 1997 Florida Annual Report. In April of 1997, we contacted the Florida Annual Reports Section to acquire a preprinted or blank form to timely complete and pay the \$165 due by May 1. At that time, we were advised by your office that Quatrine Furniture of Florida, Inc. was not registered to do business in the State of Florida and, therefore, was not required to file the report. We knew at the time that the Company was inactive and so we simply noted the information provided by your office and did not pursue the matter any further. In response to receiving the attached second notice, we have subsequently been advised that the Company was in fact registered in March, 1996.

In light of the above described circumstances, we are requesting that you accept the enclosed check for \$165 as timely paid by May 1, 1997. Thank you for any consideration given to this matter. Please note that all future reports will be timely filed by May 1.

Sincerely,

FRANK P. IANNUZZ

br enclosure

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