

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000001675 (5)

1. Corporation Name
QUARTO, INC.

FILED

98 APR 10 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1209 ISABEL DRIVE
SANIBEL FL 33957

Mailing Address

1209 ISABEL DRIVE
SANIBEL FL 33957

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1996

4. FEI Number

13-3697222

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 % Kevin MacCarthy Assoc.

Suite, Apt. #, etc.

22 444 Madison Ave., Suite 2600

City & State

23 New York, NY

Zip

24 10022

Country

25 USA

2a. Mailing Address

26 % Kevin MacCarthy Assoc.

Suite, Apt. #, etc.

27 444 Madison Ave., Suite 2600

City & State

28 New York, NY

Zip

29 10022

Country

30 USA

9. Name and Address of Current Registered Agent

ZAHONY, BERTRAND D
1209 ISABEL DRIVE
SANIBEL FL 33957

10. Name and Address of New Registered Agent

81 Name

Corporation Service Company

82

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

83

Tallahassee

84

City

FL

85 Zip Code

32301

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

Gail Shelby

as agent Gail Shelby, an agent

4-10-98

Signature, typed or printed name of registered agent and fee

(NO. 1 - Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PDS

☐ DELETE

NAME

MACCARTHY, KEVIN

STREET ADDRESS

444 MADISON AVENUE SUITE 701

CITY-ST-ZIP

NEW YORK NY 10022

TITLE

D

☐ DELETE

NAME

ZAHONY, BERTRAND D

STREET ADDRESS

1209 ISABEL DRIVE

CITY-ST-ZIP

SANIBEL FL 33957

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

000002431300--6

1.3 STREET ADDRESS

-04/16/98--01120--001

1.4 CITY-ST-ZIP

***150.00 ***150.00

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 or 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

SIGNATURE:

Gail Shelby

April 3, 1998 212-752-6700

CR2E034 (10/97)