

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 10, 1999 8:00 am  
Secretary of State

03-10-1999 90005 043 \*\*\*150.00

DOCUMENT # F96000001675

1. Corporation Name  
QUARTO, INC.

Principal Place of Business  
C/O KEVIN MACCARTHY ASSOC.  
444 MADISON AVE., SUITE 2600  
NEW YORK NY 10022

Mailing Address  
C/O KEVIN MACCARTHY ASSOC.  
444 MADISON AVE., SUITE 2600  
NEW YORK NY 10022

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  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 C/O Kevin McCarthy Associates PC

Suite, Apt. #, etc.  
214 EAST 52nd Street, 3rd Floor

22 City & State  
NEW YORK, NY

23 Zip  
10022

Country  
USA

2a. Mailing Address

26 C/O Kevin McCarthy Associates PC

Suite, Apt. #, etc.  
214 East 52nd Street, 3rd Floor

27 City & State  
NEW YORK, NY

28 Zip  
10022

Country  
USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

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 and title if applicable

(NOTE: 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 ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
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 PDS ☒ Change ☐ Addition  
1.2 NAME MACCARTHY, KEVIN  
1.3 STREET ADDRESS 214 EAST 52nd Street, 3rd Floor  
1.4 CITY-ST-ZIP NEW YORK, NY 10022

2.1 TITLE D ☒ Change ☐ Addition  
2.2 NAME Zahony, Bertrand D.  
2.3 STREET ADDRESS C/O Kevin McCarthy Associates PC  
2.4 CITY-ST-ZIP 214 East 52nd Street, 3rd Floor  
NEW YORK, NY 10022

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/99

Date

(212) 752-6700

Daytime Phone #

CR2E034 (11/98)