

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUN 19 PM 12:15

DOCUMENT # f96000002647

1. Corporation Name

QUANTUM STRUCTURES & DESIGN, INC.

2. Principal Office Address

200 E BASSE ROAD

Suite, Apt. #, etc.

3. Mailing Office Address

200 E BASSE ROAD

Suite, Apt. #, etc.

City & State

SAN ANTONIO, TX

Zip

78209

Country

USA

City & State

SAN ANTONIO, TX

Zip

78209

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

05/24/1996

5. FEI Number

36-4012870

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

40000446291

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

1200 South Pine Island Road

07/06/01-01037-034

***1350.00 ***1350.00

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

EA Wallace

EA Wallace

Assistant Secretary

Date

5-25-2001

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	KARL ELLER	2850 E CAMELBACK RD #300	PHOENIX, AZ 85016
PRES	PAUL J. MEYER	2850 E CAMELBACK RD #300	PHOENIX, AZ 85016
VP/AS	LAURA C. TONCHEFF	2850 E CAMELBACK RD #300	PHOENIX, AZ 85016
VP/TR	KURT TINGEY	2850 E CAMELBACK RD #300	PHOENIX, AZ 85016
SEC	KENNETH E. WYKER	200 E BASSE ROAD	SAN ANTONIO, TX 78209
VP	STEPHANIE A. ROSALES	200 E BASSE ROAD	SAN ANTONIO, TX 78209

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Stephanie A. Rosales
Stephanie A. Rosales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/11/01

Date

210-822-2828

Daytime Phone #

CR2E081 (9/00)

AD