


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # F96000002647 1. Entity Name QUANTUM STRUCTURES & DESIGN, INC. |  |
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|---|---|
| Principal Place of Business 200 E. BASSE ROAD SAN ANTONIO, TX 78209 | Mailing Address 200 E. BASSE ROAD SAN ANTONIO, TX 78209 |
|---|---|

DO NOT WRITE IN THIS SPACE



04152004 No Chg-P CR2E034 (10/03)

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|---|-----------------------------------|
| 4. FEI Number 36-4012870 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | D MAYS, L. LOWRY 200 E. BASSE RD. SAN ANTONIO, TX 78209 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | P MEYER, PAUL J 2850 E. CAMELBACK RD., #300 PHOENIX, AZ 85016 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | VP TONCHEFF, LAURA C 2850 E. CAMELBACK RD., #300 PHOENIX, AZ 85016 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | T TINGEY, KURT 2850 E. CAMELBACK RD., #300 PHOENIX, AZ 85016 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | S WYKER, KENNETH E 200 E. BASSE ROAD SAN ANTONIO, TX 78209 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | VP ROSALES, STEPHANIE 200 E. BASSE ROAD SAN ANTONIO, TX 78209 |

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04/29/04-80120-011 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Stephanie Rosales 4/21/04 10.832.3473

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #