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PROFIT CORPORATION ANNUAL REPORT

Q-ZAR FRANCHISING, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600004047 (4)

FILED May 12 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			I INDIINO HITO INITIA ONI PERINT		BRIII BOIII BBITIF BRIIF DIBH BDIII GIBII FABI FABI		
1701 N MARKET #200 DALLAS TX 75202		1701 N MARKET #200 DALLAS TX 75202-1887					
					3. Date Incorporated or Qualified 08/06/1996	3n. Date of Las	•
Principal F	Place of Business	2a. Mailing Address			4, FEI Number		Applied For
		26			75-2508257		Not Applicab
- Suite: Apti L	# etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat		City & State			& Election Compaign Engaging		
]	•••	28			Election Campaign Financing Trust Fund Contribution		May Be
<u>Г</u> ур	Country	Zip	Count	ry	8. This corporation has liability for i	ntangible tax unde	r s. 199.032,
	25	29	30			Yes No	
	9. Name and Address of Cui	rrent Registered Agent		T	10. Name and Address of New Re	glatered Agent	
	OUT, ELIZABETH		8	Name C	T Componition	Sustem	7.5
	5 E COLONIAL DR		8	Street Add	lress (P.O. Box Number is Not Acceptab	le)	د.
ORL	LANDO FL 32803			1200	5. Pine Isla	and thoo	<u> </u>
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			E	4 City	ntation position submits this statement for the p	FL 85 2	ip Code
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office or i	registered agent, or both, in the S	tate of Forida. Such change was	authorized	by the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	of the appointment	as registered
agent La	ami famil ar with, any accept the ot	bligations of, Section 607.0505, F	Nii Merika Nii Asst. So	bs.	// //	35	
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4. 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 and cated 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:

GNATER AND WHE DIS PRINTED NAME OF STORMED OFFICER OR DIRECTOR

4/30/97 (Q14)741-1376