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 # 1. Corporation Name F9700000448 (7)

QUALIX GROUP, INC.

Principal Place of Bysiness

1900 S. NORFOI ... 4224

Mailing Address

1900 S. NORFOLD, #224

FILED May 07 1998 8:00am Secretary of State



SAN MATEO CA 94403			SAN MATEO CA 84403					DO	NOT WRITE IN TI		
							-	Date Incorporated o		I II3 31 AOE	
							3.	01/27/1997	Qualified		
6 Principal Of	nna of Purinnes		2a, Mailing Address					FEI Number			Applied For
2. Principal Place of Business			26				•	77-0261239			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.							\$8.7	5 Additional
22			27			5.	Certificate of Status	Desired 🔲		Required	
City & State			City & State				Election Campaign			OO May Be	
23			28			0.	Trust Fund Contribu	· -		ed to Fees	
	Zip Country			Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25	·	29	30	30			Personal Property T		Yes	□ No
9. Name and Address of Current							10. Name and Address of New Registered Agent				
C	T CORPORATIO	N SYSTEM			81	Name					
1200 SOUTH PINE ISLAND ROAD					82 Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324					82 Street Address (P.O. Box Number is Not Acceptable)						
, ,	***************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			83					•	
										11-	
					84	City			1	FL 85 Z	tip Code
11. Pursuant	to the provisions	of Sections 607.0502	and 607.1508, Floric	ia Statutes, the	above	-named	corporatio	n submits this statem	ent for the purpo	se of changin	g its registered
office or re	egistered agent.	or both, in the State on decept the obligation of the obligation o	of Florida, Such chan-	ge was author	ized by	the corp	oration's t	poard of d irectors. I h	ereby accept the	appointment	as registered
	ritialithilas with, a	rkt accept the obligat	ilidia di, decilori dor i	osos, i londa t	Jaraios						
SIGNATURE	Signature, typed or pro	nted name of registered agen	and title if applicable	(NOTE: Regis	Inred Age	nt signature	required wher	n reinstating)	DA	NTE	
12.		OFFICERS AND	DIRECTORS	1	3.			ADDITIONS/CHANGE	S TO OFFICERS		
TITLE	PDC		DE DE	LETE . 1	.1 TITLE					Chan	ge 🔲 Addition
NAME	THAU, RICH			1	.2 NAME						•
STREET ADDRESS	1900 S. NO	RFOLD #224		1	3 STREET	ADDRESS					
CITY-ST-ZIP	SAN MATE	O CA 94403		1	.4 CITY-S	r-ZIP					
TITLE	VSD		DE	LETE 2	.1 TITLE		Δ			∠ Chan	ge 🔲 Addition
NAME				22 NAME			Kova	cs, Jean A			
STREET ADDRESS				2.3 STREET ADDRESS			1900 5. Norfelk #224				
CITY-ST-ZIP	SAN MATE	D CA 94403		2	4 CITY-S	T-ZIP	Sun	Mateo, CA	१५५०}		
TITLE	D		□ DE	LETE 3	1 TITLE		SIT	,		Chan	ge 🗹 Addition
NAME	HART, WILL	JAM , ,		3	2 NAME			Felt			
STREET ADDRESS		RFOLD #224		3	3 STREET	ADDRESS	1400 5.	, Norfolk#2	24		
CITY-ST-ZIP	SAN MATE	O CA 94403		3	.4. CITY- S	1 - ZIP	San M	lateo, CA 94	1403		
TITLE	D		☐ DE	LETE 4	1 TITLE	T				☐ Chan	ge 🔲 Addition
NAME	JOBE, WILL	JAM D _{1/}		4	. 2 NAME						
STREET ADDRESS		rfold, #224		4	.3 STREE 1	ADDRESS					
CITY-ST-ZIP	SAN MATE	O CA 94403		4	.4 CITY - S	T- ZIP					
TITLE	D		☑ DE	LETE 5	.1 TITLE		0			Chan	ge 🗗 Addition
NAME), samuel d		5	.2 NAME	1		Co cole			
STREET ADDRESS		rfold, #224		5	.3 STREET	Address		. Nortalk #220			
CITY-ST-ZIP	SAN MATE	O CA 94403			.4 CITY-S	T - ZIP	San 1	Mateo, CA 94	403		
TITLE	D		DE DE	LETE 6	.1 TITLE		D	•		Chan	ge 📝 Addition
NAME	MINTER, CI			6	2 NAME		Peter	Wolken	74.1		
STREET ADDRESS		RFOLE #224		6		address		Norfolk #2			
CITY-ST-ZIP		O CA 94403		1 6	4 DITY-S	r-zip	San A	nateo, CA 94	403		
12 11 5	36 31 1 1 1		t this files does not		0110.000	tion ololo	d in Coati	on 110 07(2)(i) Floric	a Statutos I furth	or portify that	the information

nereby certify that the information supplied with this filling 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 charged by the analysis of an attachment with an address.

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