FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90773 009 ***150.00

FOR PROFIT CORPORATION
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # ~~387276~~ J87276 ✓

1. Entity Name

QUINTON INTERNATIONAL INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3845 SW 41 ST.	CENTRO AEREO No. Q-3249
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O.BOX 02-5268
City & State PEMBROKE PARK, FL 33023	City & State MIAMI, FLORIDA 33102-5268
Zip / Country USA	Zip / Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2836009 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ROSS, CHARLES ALLAN

Street Address (P.O. Box Number is Not Acceptable): 3845 SW 41 ST.

PEMBROKE PARK, FL 33023

City: FL Zip Code:

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D
NAME	RIBADENEIRA, JOAQUIN
STREET ADDRESS	3845 SW 41 ST.
CITY-ST-ZIP	PEMBROKE PARK, FL 33023
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ APRIL 17,2002 593-2-468 548
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

#J87276/6411689

SU DIRECCION POSTAL ES ASI:

CENTRO AEREO No. Q-3249
P.O.BOX 02-5268
MIAMI, FLORIDA 33102-5268 USA

SU DIRECCION FISICA ES ASI:

CENTRO AEREO No. Q-3249
7801 N.W. 37th St.
MIAMI, FL. 33166-6559
TELF.: (305) 592 0839

Presentar esta contraseña para sus retiros