FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K38501

(8)

THE J. AND S. QUAD CORPORATION

SISAN ABANANOKSH 11134 GANAT OR PORT RICKEY R. 19688 2. Principal Paces of Remess 2. Amining Address 3. Date Incorporated or Qualified 10/12/1988 3. Date Incorporated or Qualified 11. Date Qualified 12/2 Date Of Status 11. Date Qualified 12/2 Date Of Status 11. Date Qualified 11. Date Quali										
1114 GRANT OR 1114 GRANT OR 1114 GRANT OR 1115 GRANT O	Principal Place of Business Malling Address						I ARRADDIA DOD 11744 IBABA BANN BONN FORT BIBLI BABAR BIDIN DEDEK DIBLI DABAR EDDA			
2. Principal Place of Business 2. Mailing Address 3. Mailing Address 4. FEI hardbox Applied For Applied For Applied For 59-29 10849 Applied For Applied For Applied For 59-29 10849 Applied For Applied	% SUSAN ABRAMOVICH % SI 11134 GRANT DR 1113			1134 GRANT DR						
2. Principal Place of Elevinos 2. Mailing Address 2. Mailing Address 3. Suite. April #, oto. Suite. April #, oto. Suite. April #, oto. Suite. April #, oto. City & State City & Sta										leport
Suite, Apt #k etc Suite, Apt #k etc Suite, Apt #k etc 27	2, Principal F	Place of Business	2a. Mailing Ac	dress				. <u> </u>		pplied For
CLY & STAND 27 27 29 20 Country 29 20 Country 29 20 Country 29 20 Country 29 30 Country 8. This corporation has liability to jungitible late under s. 199 032, Priorids Statutes & The Address of Current Registered Agent ABRAMOVICH, SUSAN 11134 GRANT DR PORT RICHEY FL 34688 81 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 84 Cny 85 86 87 87 88 87 88 88 88 88 88	21						59-2910849		No	ot Applicable
City A State		#, etc.	₁	#, etc.			Certificate of Status Desired			
28	22 City & Stat	Io.								
Country Zip Country Zip Country State St		ic.		e			· · · · · · · · · · · ·	<u></u>		
Q. Name and Address of Current Registered Agent Q. Name and Address of Current Registered Agent ARRAMOVICH, SUSAN 11134 GRANT DR PORT RICHEY FL 34668 181 Name 182 Sireet Address (P.O. Box Number is Not Acceptable) 183 Sireet Address (P.O. Box Number is Not Acceptable) 184 City 185 Viner Address (P.O. Box Number is Not Acceptable) 185 Viner Address (P.O. Box Number is Not Acceptable) 186 Vity 187 Viner Address (P.O. Box Number is Not Acceptable) 188 Viner Address (P.O. Box Number is Not Acceptable) 189 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 181 Name 182 Viner Address (P.O. Box Number is Not Acceptable) 183 Viner Address (P.O. Box Number is Not Acceptable) 184 City 185 Viner Address (P.O. Box Number is Not Acceptable) 185 Viner Address (P.O. Box Number is Not Acceptable) 186 Vity 187 Viner Address (P.O. Box Number is Not Acceptable) 188 Viner Address (P.O. Box Number is Not Acceptable) 189 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 180 Viner Address (P.O. Box Number is Not Acceptable) 181 Viner Address (P.O. Box Number is Not Acceptable) 182 Viner Address (P.O. Box Number is Not Acceptable) 183 Viner Address (P.O. Box Number is Not Acceptable) 184 Viner Address (P.O. Box Number is Not Acceptable) 185 Viner Address (P.O. Box Number is Not Acceptable) 185 Viner Address (P.O. Box Number is Not Acceptable) 186 Viner Address (P		Country	····	I Co	untry	,				
BRAMOVICH, SUSAN 11134 GRANT DR PORT RICHEY FL 34668 82 Street Address (P.O. Box Number is Not Acceptable) 83 Verent Address (P.O. Box Number is Not Acceptable) 84 City 85 Street Address (P.O. Box Number is Not Acceptable) 85 Verent Address (P.O. Box Number is Not Acceptable) 86 Verent Address (P.O. Box Number is Not Acceptable) 87 Verent Address (P.O. Box Number is Not Acceptable) 88 Verent Address (P.O. Box Number is Not Acceptable) 89 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 81 Verent Address (P.O. Box Number is Not Acceptable) 82 Verent Address (P.O. Box Number is Not Acceptable) 83 Verent Address (P.O. Box Number is Not Acceptable) 84 Verent Address (P.O. Box Number is Not Acceptable) 85 Verent Address (P.O. Box Number is Not Acceptable) 86 Verent Address (P.O. Box Number is Not Acceptable) 87 Verent Address (P.O. Box Number is Not Acceptable) 88 Verent Address (P.O. Box Number is Not Acceptable) 89 Verent Address (P.O. Box Number is Not Acceptable) 89 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 81 Verent Address (P.O. Box Number is Not Acceptable) 82 Verent Address (P.O. Box Number is Not Acceptable) 83 Verent Address (P.O. Box Number is Not Acceptable) 84 Verent Address (P.O. Box Number is Not Acceptable) 85 Verent Address (P.O. Box Number is Not Acceptable) 86 Verent Address (P.O. Box Number is Not Acceptable) 87 Verent Address (P.O. Box Number is Not Acceptable) 88 Verent Address (P.O. Box Number is Not Acceptable) 89 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80 Verent Address (P.O. Box Number is Not Acceptable) 80	24		├ ──┐ '	 				· · ·		
ABRAMOVCH, SUSAN 11134 GRANT DR PORT RICHEY FL 34688										
### Street Address (P.O. Box Number is Not Acceptable) ### City	ABA	AMOVICH, SUSAN		//////////////////////////////////////	81	Name				
B3	1113	34 GRANT DR		82 S		Street Ad-	dress (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered difference or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in a familiar with, and accept the objections of Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. DELETE 11. THILE 1. STATE ADDRESS DELETE 1.1 THILE 1.1 THILE 1.2 NAME 1.3 STREET ADDRESS 1.1 STREET ADDRESS 1.1 STREET ADDRESS 1.2 LOTY-ST-ZP 1.3 STREET ADDRESS 1.4 CITY-ST-ZP 1.4 CITY-ST-ZP 1.5 LOTY-ST-ZP 1.5 LOTY-ST	PUR	(I RICHEY FL 34668			83					
11. Pussant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE Signature, typicid or protect manu of registered agent and their it applicable. PROTE Registered Agent signature required when reinitating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. III. D ABRAMOVICH, SUSAN 11.34 GRANT OR 11.35 STREET ADDRESS CITY-ST-ZPP TITLE DELETE 2 INTILE DELETE 3.1 STREET ADDRESS CITY-ST-ZPP TITLE DELETE 3.3 STREET AD					84	City	· · · · · · · · · · · · · · · · · · ·	<u></u>	85 Zip	Code
College of registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and manual manual accept the obligations of, Section 607.0505, Florida Statutory. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. 1101.	11. Pursuant	to the provisions of Section	ons 607 0502 and 607 1508. Fig	rida Statutes, the s	hov	a-named co	reportion submits this statement for the p	urpose of a	phonolog ii	In rapidated
Signature, typed or printed name of angine and line if applicable third Registered Agent signature required when reinstatory) DATE	office or i	registered agent, or both,	. in the State of Florida, Such ch	ange was authorize	id bi	/ the corpor	ation's board of directors. I hereby accep	t the appoi	intment as	registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11114	SIGNATURE									
TITLE	19				d Ag	ant signature req			DIDEOTOR	20 (1) 40
ABRAMOVICH, SUSAN 12 MAME 13 STREET ADDRESS 11134 GRANT DR 13 STREET ADDRESS 14 GITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			IT± F	· · · · · I···	ADDITIONS/CHANGES TO OFFIC			
1134 GRANT DR	NAME							•		7100/10/1
14 CITY-ST-ZIP PORT RICHEY FL	STHEET ADDRESS					ADDRESS				
DELETE DELETE 2.1	CITY - ST - ZIP									
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP	TITLE								Change	Addition
2 4 CITY-ST-ZIP	NAME			221	AME					
DELETE DELETE 3.1 TITLE Change Addition	STREET ADDRESS			2.3 9	TREET	ADDRESS	•			
STREET ADDRESS STRE	CITY - ST - ZIP				CiTY-S	ST-ZIP				
STREET ADDRESS S.3. STREET ADDRESS S.4. CITY-ST-ZIP S.4. CITY-ST-ZIP S.4. CITY-ST-ZIP S.4. CITY-ST-ZIP S.4. CITY-ST-ZIP STREET ADDRESS STREET ADDRESS S.4. STREET ADDRESS S.4. STREET ADDRESS S.4. CITY-ST-ZIP S.4. CIT	THLE			DELETE 3.1 T	TLE				Change	Addition
STREET ADDRESS STRE	NAME			3.2 N	AME					
DELETE	STREET ADDRESS			3.3 S	TAEET	ADDRESS				
AAME	CITY - ST - ZIP					ST-ZIP		· · · · · · · · · · · · · · · · · · ·	-	
A 3 STREET ADDRESS A 4 CITY - ST - ZIP			ليا	4,11				L	Change	L Addition
A CITY - ST - ZIP										
TITLE										
						T-21P			T 05	1 4 4 7 7 7 7 7
STREET ADDRESS			U					Ļ		Addition
CITY-ST-ZIP						ADDRESS				
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS - - -										İ
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS			П			1-211		Г	Channe	Addition
STREET ADDRESS 6.3 STREET ADDRESS			LJ					L.	T Cupula	Aguitoti ()
						ADDRESS				
	CITY - ST - ZIP									

SIGNATURE:

14. 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 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 changed, or on an attachment with an address.

FILED

May 02 1997 8:00am

Secretary of State

I INDIANE AND COM INCOMENIOUS MANDE MANDE BEREI BEREI BEREI REREI REREI REREI REREI COME