

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

FILED
May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L03314

(6)

1. Corporation Name

QUELLE CORPORATION

Principal Place of Business

413 OAK PLACE
BLDG SJ
PORT ORANGE FL 32127

Mailing Address

PO BOX 291188
PORT ORANGE FL 32129-1188

3. Date Incorporated or Qualified
07/20/1989

3a. Date of Last Report
05/01/1996

4. FEI Number
59-2959691

Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 548 Cambridge Circle

Suite, Apt. #, etc.

22 City & State
S. Daytona FL

23 Zip
32119

25 Country
Volusia

2a. Mailing Address

26 PO Box 291188

Suite, Apt. #, etc.

27 City & State
Port Orange FL

28 Zip
32129-1188

30 Country
Volusia

9. Name and Address of Current Registered Agent

WOJTAS, ROBERT

~~413 OAK PLACE, BLDG SJ~~
~~PORT ORANGE FL 32127~~

548 Cambridge Circle
S. Daytona FL 32119

10. Name and Address of New Registered Agent

81 Name

WOJTAS, Robert

82 Street Address (P.O. Box Number is Not Acceptable)

548 Cambridge Circle

83

84 City

S. Daytona

FL

85

Zip Code

32119

11. Pursuant 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 office 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, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

~~Robert Wojtas~~ 4.21.97 Robert Wojtas, President

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME
WOJTAS, ROBERT
STREET ADDRESS
PO BOX 291188
CITY-ST-ZIP
PORT ORANGE FL 32129-1188

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
548 Cambridge Circle
S. Daytona FL 32119

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

SIGNATURE:

Robert Wojtas

4.21.97 904.767.5336

CR2E034 (9/96)