

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

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M33973** (2)
1. Corporation Name:
QUATRAINE DEVELOPMENT CORPORATION, INC.



Principal Place of Business	Mailing Address
3901 SW 47 AVE STE 408 FT LAUDERDALE FL 33314 US	3901 SW 47 AVE STE 408 FT LAUDERDALE FL 33314-2815 US

3. Date Incorporated or Qualified 06/17/1986	3a. Date of Last Report 04/15/1996
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2. Principal Place of Business 21 3721 S. W. 47th AVE. SUITE 307 22 FT. LAUDERDALE, FL 33314 City & State 23 Zip 24	2a. Mailing Address 26 3721 S. W. 47th AVE. SUITE 307 27 FT. LAUDERDALE, FL 33314 City & State 28 Zip 29
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4. FEI Number 59-2689096	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	

9. Name and Address of Current Registered Agent	
SPEAR, DAVID A 3901 SW 47 AVE STE 408 FT LAUDERDALE FL 33314	

10. Name and Address of New Registered Agent	
81 Name SPEAR, DAVID A.	
82 Street Address (P.O. Box Number is Not Acceptable) 3721 S.W. 47 AVENUE STE 307	
83 FT LAUDERDALE	
84 City FL	85 Zip Code 33314

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 *[Signature]* 4/29/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	DPT ☐ DELETE
NAME	SPEAR, L. WILLIAM
STREET ADDRESS	3901 SW 47 AVE, STE 408
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	DVS ☐ DELETE
NAME	SPEAR, JEFFREY N.
STREET ADDRESS	3901 SW 47 AVE, STE 408
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	DV ☐ DELETE
NAME	SPEAR, DAVID A.
STREET ADDRESS	3901 SW 47 AVE, STE 408
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	AT ☐ DELETE
NAME	SPEAR, DAVID A.
STREET ADDRESS	3901 SW 47 AVE, STE 408
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	AS ☐ DELETE
NAME	PERKINS, ROSEMARIE
STREET ADDRESS	3901 SW 47 AVE, STE 408
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	DPT ☒ Change ☐ Addition
1.2 NAME	SPEAR, L. WILLIAM
1.3 STREET ADDRESS	3721 SW 47th AVE STE 307
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314
2.1 TITLE	DVS ☒ Change ☐ Addition
2.2 NAME	SPEAR, JEFFREY N.
2.3 STREET ADDRESS	3721 SW 47th AVE STE 307
2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314
3.1 TITLE	DV ☒ Change ☐ Addition
3.2 NAME	SPEAR, DAVID A.
3.3 STREET ADDRESS	3721 SW 47th AVE STE 307
3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314
4.1 TITLE	AT ☒ Change ☐ Addition
4.2 NAME	SPEAR, DAVID A.
4.3 STREET ADDRESS	3721 SW 47th AVE STE 307
4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314
5.1 TITLE	AS ☒ Change ☐ Addition
5.2 NAME	PERKINS, ROSEMARIE
5.3 STREET ADDRESS	3721 SW 47th AVE STE 307
5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314
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 as an attachment with an address.

SIGNATURE: *[Signature]* 4/29/97 954/581-9000
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)