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

**PROFIT CORPORATION** ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(5)

QUASAR TECHNOLOGIES, INC.

FILED										
Feb 04 1998 8:00am	1									
Secretary of State										

Change

954-564-6598

☐ Addition

						_		<i>e</i> e e e e e e e e e e e e e e e e e e	III <b>ara</b> ii i <b>ka</b> i
Principal Place of Business . Mailing Address							A1511 B1811 B1811	#1 <b>4</b> 17 <b>616</b>	
1520 NE 16TH TERR 1520 NE 16TH TERR									
FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304						DO NOT WRITE II	NI TUUC CDAC	·c	
						3. Date Incorporated or Qualified	N INIS SPAC		
						07/28/1988			
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26				65-0093326		Nc	ot Applicable
Sulte, Ap	t. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1		Additional
22		27						Fee Re	equired
City & Sta	ate	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip		intry		8. This corporation owes or has paid			
24	25	29	30	<del></del>		Personal Property Tax due June 3			□ No
	9. Name and Address of Curren	ut Hedisteleo wdeut		81	Name	10. Name and Address of New Regi	steled Agen	<u>'</u>	
	UJOL, HUMBERTO			]"	l varie				
	520 N.E. 16 TERRACE			82	Street Addre	ss (P.O. Box Number is Not Acceptable	3)		
r	T. LAUDERDALE FL 33304			83	<del></del>				
				63					
				84	City		FL 85	Zip	Code
11. Pursuar	t to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the a	bove	-named corpo	ration submits this statement for the purify board of directors. I hereby accept	rpose of char	nging if	ts registered
office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a nations of, Section 607,0505. Flo	authorize orida Stat	d by lutes	the corporatio	in's board of directors. I hereby accept	the appointm	ient as	registered
		10000 01 000000 000 00000 110	maa ora		•				
SIGNATURE	Signature, typed or printed hame of registered ag-	ent and title if applicable. (NOT)	E: Angistere	d Age	nt signature required	when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIR	CTOP	RS IN 12
TITLE		☐ DELETE	1.1 (1	TLE				Change	☐ Addition
NAME	PUJOL, HUMBERTO		1.2 N/	AME					
STREET ADORESS			1.3 SI	REET	ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 0	TY-SI	r-ZIP				
TITLE		☐ DELĒŤ <b>E</b>	2.1 Ti	TLE	-			Change	☐ Addition
NAME	FRAILE, JULIE-IRANIA		2.2 N/	AME					
STREET ADDRESS			2.3 S1	IREET	ADDRESS				
CITY-ST-ZIP	OPA LOCKE FL		2.401		iT-ZIP				
TITLE		☐ DELETE	3.1 TJ	TLE			i 🔲	Change	Addition Addition
NAME			3.2 N	AME					
STREET ADDRESS			33 ST	AEET.	ADDRESS				
CITY-ST-ZIP			3 4. C	ITY-S	IT-ZIP				
TITLE		☐ DELETE	4.1 70	TLE				Change	Addition
NAME			4.2 N	AME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI	1Y - S1	r- 21P				
TITLE		☐ DELETE	5.1 TI	î l E				hange	Addition
NAME			52 NA	ME	ļ				ļ
STREET ADDRESS	.1		5.3 ST	REET	ADDRESS				

5.4 CITY - ST - ZIP

6.4 CITY - ST - ZIP 14. 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 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.

PUJO1 1-26-98

6.1 THILE

6.2 NAME 6.3 STREET ADDRESS

HUM BERTO

DELETE