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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # MS

Principal Place of Business

M92103

(4)

Mailing Address

QUAD INVESTMENT, INC.

FILED
Jan 21 1998 8:00am
Secretary of State



C/O JOSEPH S. GORDIN 5011 SW 16TH PLACE CAPE CORAL FL 33914 US		5011 SW 16TH PLACE	C/O JOSEPH S. GORDIN 5011 SW 16TH PLACE CAPE CORAL FL 33914 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/09/1009	
9 Principal Pl	ace of Business	2a. Mailing Address			08/02/1988 4. FEI Number	T Applied For
	ace of business	26				Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			65-0064368	\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28	Zip Country			Added to Fees
24	25	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes	
24]	9. Name and Address of Cu		1301		10. Name and Address of New Registered	
60	RDIN, JOSEPH S.			91 Name		· · · · · · · · · · · · · · · · · · ·
	11 SW 16TH PLACE		20 0 141		(0.0.0.1)	
	PE CORAL FL 33914			82 Street Address (P.O. Box Number is Not Acceptable)		
CAI	FE CORRE FE 33914		Ī	33		
. •			'	34 City	Fi	85 Zip Code
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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when relinstating) DATE						
12.	OFFICERS	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DST	DELETE	1.1 TUTA	E		☐ Change ☐ Addition
NAME	SEALFON, IRWIN T.		1.2 NAM	AE.		
STREET ADDRESS	MAA AADAI BB		1.3 STR	EET ADORESS		
CITY-ST-ZIP	CAPE CORAL FL	PE CORAL FL 1.40		7-ST-ZIP		
TITLE	DP	DELETE	2.1 TIŤL	E		Change Addition
NAME	Gordin, Joseph S.		2.2 NAM	AE		
STREET ADDRESS	5011 SW 16TH PALCE		· 2.3 STREET AD			
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP		
TITLE	•	☐ DELETE	3.1 TITE	E		Change Addition
NAME			3.2 NAM	AE		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		Y-ST-ZIP		
TITLE			4.1 TITL			Change Addition
NAME			4. 2 NA	•		
STREET ADDRESS				LET ADDRESS		
CITY-ST-ZIP		DOLCTE.		(-ST-ZIP		Change Addition
TITLE		LJ DELETE 51TI		Ī		Change Addition
NAME			5.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE		r-ST-ZIP		Change Addition
TITLE			6.1 TITL			C change C woorken
NAME OTREET ADDRESS			6.2 NAM			
STREET ADDRESS				EET ADDRESS		
14 Lhereby c	ertify that the information supplies	ed with this filing does not qualit	ly for the ever	rotion stated	d in Section 119.07(3)(i), Florida Statutes, Lighther of	ertify that the information
14. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is annual report its frue and agrurate 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 of the receiver or trustee employeed of execute fris 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.						