

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M98981 (7)

1. Corporation Name

QUALITY DEVELOPMENT, INC.



Principal Place of Business Mailing Address
C/O JAMES MCCARTHY 1285 AVE. OF THE AMERICAS, 36TH FLOOR
NEW YORK NY 10019 C/O JAMES MCCARTHY 1285 AVE. OF THE AMERICAS, 36TH FLOOR
NEW YORK NY 10019

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

09/12/1988

3a. Date of Last Report

04/20/1995

4. FEI Number

65-0072588

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 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 the corporation

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KAWAMURA, HAJIME	
STREET ADDRESS	1285 AVE. OF THE AMERICAS, 36 FL.	
CITY - ST - ZIP	NEW YORK N.	
TITLE	P	<input type="checkbox"/> DELETE
NAME	SANO, TAKASHI	
STREET ADDRESS	1285 AVE. OF THE AMERICA	
CITY - ST - ZIP	NEW YORK NY	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MC CARTHY, JAMES	
STREET ADDRESS	1285 AVE OF THE AMERICAS	
CITY - ST - ZIP	NY NY	
TITLE	S	<input type="checkbox"/> DELETE
NAME	COHEN, ROBERT	
STREET ADDRESS	1285 AVE. OF THE AMERICAS	
CITY - ST - ZIP	NEW YORK NY	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MUSHIKA, HIDEKI	
STREET ADDRESS	1285 AVE. OF THE AMERICAS, 36TH FLOOR	
CITY - ST - ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	Takashi Sano	
3. STREET ADDRESS	1285 Ave of the Americas	
4. CITY - ST - ZIP	New York, NY 10019	
5. TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. NAME	James McCarthy	
7. STREET ADDRESS	1285 Ave. of the Americas	
8. CITY - ST - ZIP	New York, NY 10019	
9. TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
10. NAME	Shuzo Oshima	
11. STREET ADDRESS	1285 Ave. of the America	
12. CITY - ST - ZIP	New York, NY 10019	
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY - ST - ZIP		
17. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME		
19. STREET ADDRESS		
20. CITY - ST - ZIP		

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-04/17/96--01020--014
***3000.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Takashi Sano, President

3/11/96

(212) 397-5453

CR2E034 (12/95)