

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P16671 (0)
1. Corporation Name
QUALITY GREETING CARD DISTRIBUTING COMPANY, INC.



Principal Place of Business
ONE AMERICAN ROAD
CLEVELAND OH 44144
US

Mailing Address
ONE AMERICAN RD
CLEVELAND OH 44144
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/03/1987	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 34-1535967	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 FL		86 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	AS
NAME	LIPPE, GARY	12 NAME	PHYLISS ALDEN
STREET ADDRESS	ONE AMERICAN ROAD	13 STREET ADDRESS	ONE AMERICAN ROAD
CITY-ST-ZIP	CLEVELAND OH 44144	14 CITY-ST-ZIP	CLEVELAND, OH 44144
TITLE	V	21 TITLE	AS
NAME	LITVAK, JEFF	22 NAME	MICHELLE CREGER
STREET ADDRESS	ONE AMERICAN ROAD	23 STREET ADDRESS	ONE AMERICAN ROAD
CITY-ST-ZIP	CLEVELAND OH 44144	24 CITY-ST-ZIP	CLEVELAND, OH 44144
TITLE	T	31 TITLE	
NAME	CABLE, DALE A.	32 NAME	
STREET ADDRESS	ONE AMERICAN ROAD	33 STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND OH 44144	34 CITY-ST-ZIP	
TITLE	S	41 TITLE	
NAME	GROETZINGER, JON	42 NAME	
STREET ADDRESS	ONE AMERICAN ROAD	43 STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND OH 44144	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	
NAME	WEISS, MORRY	52 NAME	
STREET ADDRESS	ONE AMERICAN ROAD	53 STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND OH 44144	54 CITY-ST-ZIP	
TITLE	D VP	61 TITLE	D
NAME	RIFFLE, PATRICIA L	62 NAME	IRVING STONE
STREET ADDRESS	ONE AMERICAN ROAD	63 STREET ADDRESS	ONE AMERICAN ROAD
CITY-ST-ZIP	CLEVELAND OH 44144	64 CITY-ST-ZIP	CLEVELAND, OH 44144

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.

SIGNATURE _____

CR2E034 (10/97)