


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

**FILED**  
**Mar 04 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P37838 (0)**

1. Corporation Name  
**MQS INSPECTION, INC.**



Principal Place of Business <b>2301 ARTHUR AVE                  ELK GROVE VILLAGE IL 60007                  US</b>	Mailing Address <b>2301 ARTHUR AVE                  ELK GROVE VILLAGE IL 60007                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 1021 Centennial Ave</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 1021 Centennial Ave</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>03/10/1992</b>	
22 City & State <b>Piscataway NJ</b>		27 City & State <b>Piscataway NJ</b>		4. FEI Number <b>36-3805594</b>	
23 Zip <b>08854</b>		25 Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Zip <b>08854</b>		25 Country <b>USA</b>		29 Zip <b>08854</b>	
26 Country <b>USA</b>		30 Country <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH 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	<b>FL 85 Zip Code</b>

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	<b>P</b>	1.1 TITLE	<b>P/D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>FUSARO, ROBERT F</b>	1.2 NAME	<b>Joseph E Milliron</b>
STREET ADDRESS	<b>8 REBEL ROAD</b>	1.3 STREET ADDRESS	<b>1021 Centennial Ave.</b>
CITY-ST-ZIP	<b>WESTPORT CT</b>	1.4 CITY-ST-ZIP	<b>Piscataway NJ 08854</b>
TITLE	<b>S</b>	2.1 TITLE	<b>S/T/D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BASSETT, ROBERT A</b>	2.2 NAME	<b>Barry Smotherman</b>
STREET ADDRESS	<b>10 MONITOR HILL ROAD</b>	2.3 STREET ADDRESS	<b>6363 Woodway Suite 925</b>
CITY-ST-ZIP	<b>NEWTOWN CT</b>	2.4 CITY-ST-ZIP	<b>Houston TX 77057</b>
TITLE	<b>VP</b>	3.1 TITLE	<b>VP</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>REINHOLDT, RODNEY</b>	3.2 NAME	<b>Steven Green.</b>
STREET ADDRESS	<b>2335 N WESTWOOD LANE</b>	3.3 STREET ADDRESS	<b>2301 Arthur Ave.</b>
CITY-ST-ZIP	<b>PALATINE IL</b>	3.4 CITY-ST-ZIP	<b>Elk Grove Village, IL 60007</b>
TITLE	<b>V</b>	4.1 TITLE	<b>Controller</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAILEY, J J</b>	4.2 NAME	<b>Joseph S Sink Jr.</b>
STREET ADDRESS	<b>600 ENGEL BLVD.</b>	4.3 STREET ADDRESS	<b>1021 Centennial Ave.</b>
CITY-ST-ZIP	<b>PARK RIDGE IL 60068</b>	4.4 CITY-ST-ZIP	<b>Piscataway NJ 08854</b>
TITLE	<b>V</b>	5.1 TITLE	<b>Controller</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SHERWIN, M F</b>	5.2 NAME	<b>James M Pearson</b>
STREET ADDRESS	<b>700 PERRIE DR, APT. 413</b>	5.3 STREET ADDRESS	<b>6363 Woodway Suite 925</b>
CITY-ST-ZIP	<b>ELK GROVE VILLAGE IL 60007</b>	5.4 CITY-ST-ZIP	<b>Houston TX 77057</b>
TITLE	<b>T</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SAWYER, JAMES S</b>	6.2 NAME	
STREET ADDRESS	<b>10 BEN COURT</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>OLD GREENWICH CT</b>	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.

SIGNATURE: *Joseph S Sink Jr.* **Joseph S Sink Jr.** 2-20-98 732-981-0800

CP2E034 (10/97)