


Jan 17 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mogam</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P93000010348 (9)</b>			
<b>1. Corporation Name:</b> <b>QUATRUM, INC.</b>			
<b>Principal Place of Business</b> <b>3414 E. ATLANTIC BLVD.</b> <b>POMPANO BEACH FL 33062</b>		<b>Mailing Address</b> <b>3414 E. ATLANTIC BLVD.</b> <b>POMPANO BEACH FL 33062-5701</b>	
<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country	
<b>g. Name and Address of Current Registered Agent</b> <b>GOLDMAN, GARY B</b> <b>2830 N.E. 203RD ST.</b> <b>SUITE 103</b> <b>NORTH MIAMI BEACH FL 33180</b>			
<b>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I am the duly authorized officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporate records of the corporation, and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</b>			
<b>SIGNATURE</b> _____ (NOTE: Registered agent signature required)			
<b>12. OFFICERS AND DIRECTORS</b>			
TITLE	NAME	<input type="checkbox"/> DELETE	
STREET ADDRESS	MAJZNER, DOMINIQUE		
CITY - ST - ZIP	3289 N.W. 28TH COURT BOCA RATON FL 33434		
TITLE	DS	<input type="checkbox"/> DELETE	
NAME	CAPUANO, EVA		
STREET ADDRESS	832 N.E. 206 ST.		
CITY - ST - ZIP	NORTH MIAMI BEACH FL		
TITLE	DV	<input type="checkbox"/> DELETE	
NAME	CAPUANO, ISAAC		
STREET ADDRESS	832 N.E. 206 ST.		
CITY - ST - ZIP	NORTH MIAMI BEACH FL 33179		
TITLE	DT	<input type="checkbox"/> DELETE	
NAME	IRWIN, MAJZNER		
STREET ADDRESS	3289 NW 28TH CT		
CITY - ST - ZIP	BOCA RATON FL		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
<b>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in the information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with an address.</b>			
<b>SIGNATURE:</b> _____ <b>DOMINIQUE MAJZNER</b>			