

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

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # P93000013986 (3)**

1. Corporation Name  
**QUICK SCAN, INC.**



Principal Place of Business

**7378 N.W. 5TH ST.  
PLANTATION FL 33317  
US**

Mailing Address

**7378 N.W. 5TH ST.  
PLANTATION FL 33317  
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 County

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

**10109 W Oakland Park Blvd.**

**Sunrise FL**

**33351 USA**

3. Date Incorporated or Quinited

**02/24/1993**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**65-0393824**

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

**ROSS, SHELDON  
10109 W. OAKLAND PARK BLVD.  
SUNRISE FL 33351**

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 607.1505, 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 signing officer or director)

Date (Printed Date of Signature)

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
P	ROSS, SHELDON	10109 W. OAKLAND PARK BLVD.	SUNRISE FL 33351	<input type="checkbox"/>
S	NOVELL, MARC	78 N. UNIVERSITY DR.	PEMBROKE PINES FL 33024	<input type="checkbox"/>
T	SANTIAGO, JOSE A JR	9630 NW 10TH STREET	PEMBROKE PINES FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	15 TITLE	16 NAME	17 STREET ADDRESS	18 CITY - ST - ZIP	19 TITLE	20 NAME	21 STREET ADDRESS	22 CITY - ST - ZIP	23 TITLE	24 NAME	25 STREET ADDRESS	26 CITY - ST - ZIP	27 TITLE	28 NAME	29 STREET ADDRESS	30 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 person 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 checked, or on an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date (Printed)

CR2E034 (12/95)