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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000050746 (5)

FILED Mar 04 1998 8:00am Secretary of State

QBS, I	NC.	Mailing	Address								
3600 GALT OCEAN DR. 3600 GALT OCEAN DR. FT. LAUDERDALE FL 33308						DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualified 07/01/1993				7
2. Principal P	lace of Business	2a. Mail	ing Address				4. FEI Number		TAI	plied For	1
21		26					65-0419844			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Fee Ro	Additional equired]
City & Stat	e		& State				6. Election Campaign Financing		\$5.00	May Be	1
23		28					Trust Fund Contribution		Added		ı
Zip	Country	Zip		Cour	ntry		8. This corporation owes or has p	aid the c	rrent year in	angible	٦
24	25	29		30			Personal Property Tax due Jun			¶ No	
	9. Name and Address of Curren	t Registered	Agent		1		10. Name and Address of New R	glatered	Agent		4
	HRINGER, GERALD S				81	Name					
	00 GALT OCEAN DR.			Ī	82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)			٦
FT.	. LAUDERDALE FL 33308				_						4
					83						ı
				-	84	City			85 Zip	Code	1
44 6	10 de la 10	0 4 000 45	On Fireda Oraba	N= 45 = -6				<u>FI</u>			4
office or i	to the provisions of Sections 607,050; registered agent, or both, in the State	2 and b∪7.15 of Florida. Su	uch change was	tes, the ab authorized	ove by	-nameo corp the corporati	oration submits this statement for the ion's board of directors. I hereby acce	purpose pt the ap	or changing r pointment as	s registered registered	
agent la	m familiar with, and accept the obliga	itions of, Sec	tion 607.0505, FI	orida Statu	ites.	•					
SIGNATURE	Signature, typed or printed name of registered age	at a ditto V appli	ontile (MO)	TE: Donietseed	· A	at alanatura raquet	ed when reinstating)	DATE			1
12.	OFFICERS AND			13.	Ager	ut signature radum	ADDITIONS/CHANGES TO OFFI		D DIRECTOR	IS IN 12	18
TITLE	D	DELETE			1.1 TIFLE				Change	☐ Addition	13
NAME	FAHRINGER, GERALD S			1.2 NA	ME						3
STREET ADDRESS	3600 GALT OCEAN DR.				1.3 STREET ADDRESS						18
CITY-ST-ZIP	FT. LAUDERDALE FL 33308			1.4 CIT	Y-ST	r-ZIP					ΙŠ
TITLE			☐ DELETE		2.1 TITLE 2.2 NAME				Change	Addition	75
NAME											1
STREET ADDRESS				2.3 STF	EET /	ADDRESS		* *			
CITY-ST-ZIP				2.4 CI	IY - \$1	T-ZIP					
TITLE			DELETE	3.1 TIT	LE				Change	Addition	1
NAME				3.2 NA	ME						-
STREET ADDRESS				3.3 \$T	REET A	ADDRESS					
CITY-ST-ZIP				3 4. CI	ry-Si	T-ZIP					
TITLE			DELETE	4.1 TH	LE				Change		
NAME				4, 2 NA	ME						1
STREET ADDRESS				. 4.3 STF	REET /	address					
CITY-ST-ZIP				4.4 CIT	Y - ST	r-ZIP				[
TITLE			DELETE	5.1 TIT		1			☐ Change	Addition	1
NAME				5.2 NA							1
STREET ADDRESS						ADORESS					1
CITY-ST-ZIP				E 4 017		מוכ ז					1
TITLE					Y-\$T	1 · ZIF					┥.
NAME			DELETE	6.1 TIT	LE	1-214		······································	Change	Addition	٦
10 2110			DELETE	6.1 TITI 6.2 NA	LE ME			· ·	Change	Addition	
STREET ADDRESS			DELETE	6.1 TITI 6.2 NA	LE ME REET A	ADDRESS			Change	Addition	

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 supplication on the receiver of 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changes.

SIGNATURE: Y

PAUS FAHRINGEN PUN X2/20198 9545646