

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000060561
1. Corporation Name

TOTAL QUALITY SYSTEMS, INC.

Principal Place of Business

2091 E. Ocean Blvd.
Stuart, FL 34996

Mailing Address

same

2. Principal Place of Business

21 same as above

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 same as above

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

August 26, 1993

3a. Date of Last Report

March 1996

4. FEL Number

65-0454475

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

Frank P. Tyson, Jr.
3101 N. Federal Hwy., Suite 500
Fort Lauderdale, FL 33306

10. Name and Address of New Registered Agent

81 Name

Makoto Goto

82 Street Address (P.O. Box Number is Not Acceptable)

2891 E. Ocean Blvd.

83

84 City

Stuart

FL

85 Zip Code

34996

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

Signature typed or printed name of registered agent and the date

Makoto Goto, President

MAY 10, 1996

12. OFFICERS AND DIRECTORS

TITLE Frank P. Tyson, Jr. ☒ DELETE
NAME
STREET ADDRESS 3101 N. Federal Hwy., Suite 500
CITY-ST-ZIP Fort Lauderdale, FL 33306

TITLE Vice President ☒ DELETE
NAME Makoto Goto
STREET ADDRESS 2891 E. Ocean Blvd.
CITY-ST-ZIP Stuart, FL 34996

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Makoto Goto
1.3 STREET ADDRESS 2891 E. Ocean Blvd.
1.4 CITY-ST-ZIP Stuart, FL 34996

2.1 TITLE Vice President ☒ Change ☐ Addition
2.2 NAME Gerald N. Kieft
2.3 STREET ADDRESS 2891 E. Ocean Blvd.
2.4 CITY-ST-ZIP Stuart, FL 34996

3.1 TITLE Secretary ☐ Change ☒ Addition
3.2 NAME Makoto Goto
3.3 STREET ADDRESS 2891 E. Ocean Blvd.
3.4 CITY-ST-ZIP Stuart, FL 34996

4.1 TITLE Treasurer ☐ Change ☒ Addition
4.2 NAME Makoto Goto
4.3 STREET ADDRESS 2891 E. Ocean Blvd.
4.4 CITY-ST-ZIP Stuart, FL 34996

5.1 TITLE 000001854850 ☐ Change ☐ Addition
5.2 NAME -06/07/96--01009--024
5.3 STREET ADDRESS ***8.75
5.4 CITY-ST-ZIP

6.1 TITLE 200001854852 ☐ Change ☐ Addition
6.2 NAME -06/07/96--01009--025
6.3 STREET ADDRESS ***61.25
6.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Makoto Goto, President

MAY 10, 1996

407-220-6961

CR2E034 (12/95)