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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000062639 (8)

QUEST TECHNOLOGIES, INC.

Principal Placi	e or Business	Mailing Address	Mailing Address			, , , , , , , , , , , , , , , , , , , ,			
8180 DORAL BLVD SUITE 402 MIAMI FL 33166		8180 DORAL BLVD Suite 402 Miami Fl 33166-6686							
. U\$		US				 Date Incorporated or Qualified 09/08/1993 		of Last F 5/1996	leport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Aı	oplied For
21		26			65-0437938 Not Applicable			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	M		Additional	
22		27							equired
City & State	0	City & State				6. Election Campaign Financing	г		May Be
Zip Zip	Country	7ip		intry		Trust Fund Contribution			to Fees
24]	25	<u>⊢</u>	<u></u> ⊢-¬	ини у		8. This corporation has liability for in Florida Statutes	ntangible ta] Yes 🔲		. 199.032,
24	9. Name and Address of Curren	29 29 Agent	30	1		10. Name and Address of New Re-			
ADA	MES, LEONARDO D.	Trog otto Trog otto		81	Name	10. 11	g.0.0.00 F.		
	0 SW 115 CT							·····	
	MI FL 33165			82	Street Addi	ress (P.O. Box Number is Not Acceptab	le)		
WILL	IIII 7 E 50 100			83		// 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
1								т	
				84	City		Fi.	1	Code
11. Pursuant office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607,1508, Florida Sta of Florida, Such change wations of, Section 607,0505	atutes, the a las authorize Florida Sta	bove d by tutes	named corp the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of o	hanging i	ls registered registered
SIGNATURE	Signature, typed or printed name of registered age					rud when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	P	DELFIE	1.1 1	11LE				Change	☐ Addition
NAME	ADAMES, LEONARDO D.		1.2 N	AME	1				
STREET ADDRESS	3300 SW 115CT		1.3 \$	TREET	ADDRESS				
CITY-SY-ZIP	MIAMI FL		1.4 0	ny-s	1-710				
TITLE	VP	DELETE	21]	ILF				Change	Addition
NAME	ADAMES, LEONARDO D.		2.2 N	AME	Ì				
STREET ADDRESS	3300 SW 115 CT		2.3 \$	1REET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		2.40	HY-S	SI - ZIP				
TITLE	\$	☐ DELETE	3.1 Ti	TLE				Change	Addition
NAME	ADAMES, JESICA B.		3.2 N	AME]				
STREET ADDRESS	3300 SW 115 CT		3.3 S	TREET	ADDRESS				
CITY-ST-2IP	MIAMI FL		34.0	IIY-S	37 - Z(P				
TITLE		☐ DELETE	4.1 1	TLE				Change	Addition
NAME			4 2 N	IAME					
STREET ADDRESS			435	1KEET	ADDRESS				
CITY-ST-ZIP			4.4 0	HY-S	T-ZIP				
TITLE		☐ DELETÉ	5.1 T	TLE				Change	Addition
NAME			5.2 N	AME	ļ				
STREET ADDRESS			5.3 S	1REET	ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-S	1 - ZIP				
TITLE		DELETE	6.1 TI					Change	Addition
NAME	4.4		62 N	AME					
STREET ADDRESS			6.3 S	1REET	ADDRESS				
000 07 740	•			av e					

14. I do 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 chapted, or on an attachment with an address.