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

PROFIT CORPORATION ANNUAL REPORT



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

1996

POCUMENT # P9400086206 (7)

## QUALITY HEALTH PRODUCTS, INC.

Principal Place of Business Maling Address					####
STE 314 DEERFIELD &	I MILITARY TRAIL BEACH FL 33442	1313 SOUTH MILITAR STE 314 DEERFIELD BEACH F			
US		US		<ol> <li>Date Incorporated or Qualified</li> <li>11/29/1994</li> </ol>	3a. Date of Last Report 03/23/1995
· ·	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# etc	Suite, Apt. #, etc.		65-0536287	Not Applicable
22		27 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Orty & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zıpı	Country	Ζφ	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	No
<u> </u>	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
COSSA, MARY A			82 Street Add	dress (P.O. Box Number is Not Acceptable	(e
1313 SOUTH MILITARY TRAIL					
NO. 314			83		
DEERFIE	ELD BEACH FL 33442		84 City		FL 85 Zip Code
11. Pursuant t or registen familiar wit	to the provisions of Sections 607.0502 ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	2 and 607.1508, Florida Statu da: Such change was authori tion 607.0505, Florida Statute	Ites, the above named corporation's boars	oration submits this statement for the purp ard of directors. Thereby accept the appoi	ose of changing its requisioned office
SIGNATURE		4			
	Signature, hypertion persons name, of registers diagonal		rDTE. Begisteren Agent signature raupur		3/A*E
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12
TIFLE	PDC	DELETE	T 1 TIVLE		Change Addition
NAME	MATHEWS, MICHAEL		1.2 NAME		
STREET ADDRESS	4851 NE 28TH AVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	LIGHTHOUSE POINT FL 330	· · · · · · · · · · · · · · · · · · ·	1.4 CiTY - ST - ZIP		
TITLE	VPD	DELETE	2 1 TITLE		Change C Addition
NAME .	SONTAG, CAROL MANSFIEL		2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
City -St - Zip Title	MIAMI FL 33138 STD		2.4 CITY - ST - ZIP		
NAME	COSSA, MARY ANNE	☐ DEFELE	3 1111LF		Change Addition
STREET ADDRESS	1155 S. HILLSBORO MILE #	R1A	3.2 NAME		
CITY - ST - ZIP	HILLSBORO BEACH FL 3306		3.3 STREET ADDRESS		
TITLE	D	DELETE	3.4.01TY-ST-Z/P 4.1.11TLE		☐ Change ☐ Addition
NAME	SONTAG, DAVID		4.2 NAME		☐ outside ☐ vonition
STREET ADDRESS	4000 TOWERSIDE TERR #12	107	4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33138	197	4.4 CHY-SI-ZIP		
TITLE	D	DELETE	5 1 Tifus		☐ Change ☐ Addition
NAME	LOW, KATHLEEN		5.2 NAME		El state El Montoli
STREET ADDRESS	4851 NE 28TH AVE		5 3 STREET ADDRESS		
CITY-ST-ZIP	LIGHTHOUSE POINT FL 3306	64	5.4 CIFY - ST-ZIP		
TITLE		DELETE	6 1 TifLE		Change Addition
NAME			6.2 NAME		_ , _ ,
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST-ZIP			6.4 CHY+ST-ZIP		

14. I do heretry 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: ///Charter by the refinite Name of significance or purple of the property of the corporation 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 12 or Block 13 if changed, or on an attachment with a particular statute of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further control to the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further control to the corporation of the corporation of