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Mar 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000052479 (9)
 1. Corporation Name
Q-MATIC DEL CARIBE, INC.



Principal Place of Business 9032 NW 12 ST MIAMI FL 33172 US	Mailing Address P.O. BOX 195003 SAN JUAN, PUERTO RICO 00919-9003
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/07/1995	
2. Principal Place of Business 21 14343 SW 98TH TERRACE Suite, Apt. #, etc. 22 City & State 23 MIAMI FL Zip 24 33186	2a. Mailing Address 26 204 CLAYMOOR CT Suite, Apt. #, etc. 27 City & State 28 FLAT ROCK NC Zip 29 28731
4. FEI Number 65-0607267	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

MERINO, JORGE
9032 N.W. 12TH STREET
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name
ANGELO LUPO

82 Street Address (P.O. Box Number is Not Acceptable)
14343 SW 98TH TERRACE

83

84 City
MIAMI **FL** 85 Zip Code
33186

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]* DATE **03-23-98**

Signature of the current registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT <input checked="" type="checkbox"/> DELETE	NAME JORGE MERINO	STREET ADDRESS PO BOX 195003	CITY-ST-ZIP SAN JUAN, PR 00919
TITLE SECRETARY <input checked="" type="checkbox"/> DELETE	NAME JUAN VAZQUEZ	STREET ADDRESS PO BOX 363974	CITY-ST-ZIP SAN JUAN, PR 00936
TITLE <input type="checkbox"/> DELETE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> DELETE	NAME	STREET ADDRESS	CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	1.2 NAME BENKT BERG	1.3 STREET ADDRESS 204 CLAYMOOR CT.	1.4 CITY-ST-ZIP FLAT ROCK, NC 28731
2.1 TITLE SECRETARY <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	2.2 NAME INGER BERG	2.3 STREET ADDRESS SAME AS ABOVE	2.4 CITY-ST-ZIP
3.1 TITLE VP SALES <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	3.2 NAME ANGELO LUPO	3.3 STREET ADDRESS 14343 SW 96TH TERRACE	3.4 CITY-ST-ZIP MIAMI FL 33186
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied in 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 changed, or on an attachment with an address.

SIGNATURE *[Signature]* **BENKT BERG** **PRESIDENT** **2/1/98** **204 CLAYMOOR CT.**

CR2E034 (10/97)