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May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000053650 (4)

1. Corporation Name
QUICKPLAN BY KEN SAMUELS, INC



Principal Place of Business: 5240 NW 163RD ST. MIAMI LAKES FL 33014
Mailing Address: 5240 NW 163RD ST. MIAMI LAKES FL 33014-6226

3. Date Incorporated or Qualified: 07/05/1995
3a. Date of Last Report: 04/01/1996
4. FEI Number: -APPLIED FOR 65-0649130
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
VELTRI, KAREN J
536 N. VICTOR PARK RD.
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name: SAMUELS, KENNETH W.
82 Street Address (P.O. Box Number is Not Acceptable): 5240 N.W. 163 STREET
83
84 City: MIAMI FL 85 Zip Code: 33014

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: *Ken Samuels* PRESIDENT DATE: 4/24/97

12. OFFICERS AND DIRECTORS
D SAMUELS, KEN 57 HENDRICKS ISLE FT. LAUDERDALE FL 33301
P VELTRI, KAREN 3315 SW 11TH AVE FT. LAUDERDALE FL 33315

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE: *Ken Samuels* PRESIDENT DATE: 4/24/97 (305)620-7909

CR2E034 (9/96)