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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000040011 (4)

QUICK CHANGER, INC.

## FILED May 04 1998 8:00am Secretary of State

40,01									
Principal Plac	e of Business	Mailing Addre	DSS				HATO UHILIO SUTANI OURANI DONALI D	ISKAN SINGRA USBITA USBISI INI	JD( 1101 101)
6803 SW 35TH WAY 6803 SW 35TH WAY									
GAINESVILLE FL 32608 GAINESVILLE FL 32608									
i							DO NOT WRITE IN	THIS SPACE	
						3. Date Incorpora			
6 District	December 1	15. 400.00				05/06/199	<u> </u>		
···	lace of Business	2a. Mailing Ad	uaress			4. FEI Number 59:33813	46	<u> </u>	oplied For
Suite, Apt.	# etc	[26] Suite Act	Suite. Apt. #, etc.				45	¬ \$8.75	ot Applicable
22 27			C. #, 616.			5. Certificate of S	itatus Desired	Fee Re	
City & Stat	θ		City & State			6. Election Camp	aigo Financing		May Be
23		28				Trust Fund Co			to Fees
Zip Country		Zip				8. This corporation owes or has paid the current year Intangible			
24	25 29		30			Personal Property Tax due June 30.  Yes No			
	9. Name and Address of Currer	t Registered Ager	nt			10. Name and Ad	dress of New Regis	tered Agent	
FO	JUST, V. JAMES			81	Name				Ĭ
	03 8W 35TH WAY			82	Street Ado	dress (P.O. Box Number	er is Not Acceptable)		
GAINESVILLE FL 32808				02	Oliootitae				
				83					
				84	City	- <del></del>	<del></del>	85 Zip	Code
				"	City				
office or r agent. I a SIGNATURE	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the obliging	of Florida. Such chalions of, Section 6	nange was a 07.05 <b>05</b> , Flo	uthorized b orida Statuto	y the corpora s	ation's board of directo	rs. I hereby accept th	pose of changing it no appointment as	s registered registered
12,	Signature, typod or printed name of registered agr OFFICERS AN		(NOI)	13.	ont signature requ	uired when reinstating)	ANGES TO OFFICER		25 IN 12
TITLE	DV OTTOLING AIN		DELETE	1.1 TITLE		ADDITIONO	ANGLO TO CIT IOLIT	Change	Addition
NAME	FOUST, V. JAMES	_		1.2 NAME					
STREET ADDRESS	6803 SW 35TH WAY				T ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL 32608			1.4 C/TY-	· I				
TITLE	DP		DELETE	2.1 TITLE	51-211			Change	Addition
NAME	GATTON, CHARLES J	_		2.2 NAME				7	_
STREET ADDRESS	6803 SW 35TH WAY				I ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL 32608			2. 4 CITY-					
TITLE	DST		DFLETE	3.1 TITLE	27. 27			Change Change	Addition
NAME	KAPLAN, SANDRA K			3.2 NAME		KAPLAN,	SAND BR	r Ki	ĺ
STREET ADDRESS	6903 SW 35TH WAY			3.3 STREE	I ADDRESS	KAPLAN,		, , , ,	
CITY-ST-ZIP	GAINESVILLE FL 32608			3.4 CITY-	ST-ZIP		(30)		1
TITLE			DELETE	4.1 TITLE				Change	☐ Addition
NAME				4. 2 NAME	[				Į
STREET ADDRESS				4.3 STREE	T ADDRESS				ļ
CITY-ST-ZIP				4.4 CITY -	ST-ZIP				ĺ
TITLE			DELETE	5.1 717LE				☐ Change	Addition
NAME				5.2 NAME	ł				1
STREET ADDRESS				5.3 STREE	F ADDRESS				
CITY-ST-ZIP				54 CITY	1				1
TITLE			DELETE	61 TITLE				☐ Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREE	F ADDRESS				
CITY-ST-ZIP				6.4 CITY-1					
	portify that the information cumplied w	ith this filing doos r	ot qualify fo			n Section 119 07/3)/i)	Florida Statutos I furt	thor cartify that the	information

14. Thereby certify that the information supplied with this filing cloes 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 eath; 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 or pattachment with an address.

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