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Mar 14 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 # P96000052014 (3)

1. Corporation Name:

QUEITS, ADAMS, DOLFI, INC.

Principal Place of Business

ONE BISCAYNE TOWER, SUITE 3250
2 SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131

Mailing Address

ONE BISCAYNE TOWER, SUITE 3250
2 SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131-1806

2. Principal Place of Business

21 169 E. FLAGLER ST

Suite, Apt. #, etc

22 940

City & State

23 MIAMI FLORIDA

Zip

24 33131

Country

25 DADE

2a. Mailing Address

26 1155 AVENUE OF AMERICAS

Suite, Apt. #, etc

27

City & State

28 NEW YORK, NY

Zip

29 10036

Country

30 NEW YORK

9. Name and Address of Current Registered Agent

TANEN, JEFFREY S ESQ.
ONE BISCAYNE TOWER, SUITE 3250
2 SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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: typed or printed name of registered agent (if applicable)

(NOTE: Registered Agent signature required when filing a change)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~0~~
NAME TANEN, JEFFREY S
STREET ADDRESS 2 S BISCAYNE BLVD., S-3250
CITY-ST-ZIP MIAMI FL 33131

☒ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PRESIDENT ☐ Change ☒ Addition

12 NAME GERARD ADAMS
13 STREET ADDRESS 3 DEY FARM DR
14 CITY-ST-ZIP CRANBURY, NJ

21 TITLE SECRETARY ☐ Change ☒ Addition

22 NAME EDWARD GUEITS
23 STREET ADDRESS 378 CLAY PITS RD
24 CITY-ST-ZIP E. NORTHPORT, NY

31 TITLE TREASURER ☐ Change ☒ Addition

32 NAME SETH DOLFI
33 STREET ADDRESS 11440 SW 99 CT.
34 CITY-ST-ZIP MIAMI, FL

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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)(f), 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 to an address.

SIGNATURE:

CR2E034 (9/96)