## 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 # P96000085477 (3)

QUALITY COPIERS INTERNATIONAL, INC.

## **FILED** Apr 21 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									
2511 S.W. 11TH STREET BOYNTON BEACH FL 33426			2511 S.W. 11TH STREET						
		BOYNT	BOYNTON BEACH FL 33426				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified	J OF AGE	
							10/14/1996		
2 Principal P	ace of Business	2a Maili	ng Address				4. FEI Number	I A	pplied For
21	age of paginious	26	g				65-0752835	-	ot Applicable
Suite, Apt	#, etc.		, Apl. #, etc.						Additional
<u></u>		27				5. Certificate of Status Desired	Fee R	equired	
City & State			City & State		,,,,,	6. Election Campaign Financing	\$5.00	May Be	
23			Trust Fund Contribution		to Fees				
Ζιp	Country	Zip		Cour	ntry		8. This corporation owes or has paid the o	urrent year In	tangible
24	25	29		30			Personal Property Tax due June 30.		□ No
	g, Name and Address of Cu	rrent Registered	Agent		1	· ·	10. Name and Address of New Registere	d Agent	
DU	MAS, EMILE				81 Name				
2511 S.W. 11TH STREET		ŀ	82	Street Ar	ddress (P.O. Box Number is Not Acceptable)				
l BO	YNTON BEACH FL 33426			· [					
					83				
				F	84	City		. 85 Zip	Code
						1	<u>F</u>		
11. Pursuant	to the provisions of Sections 607	.0502 and 607.150	08, Florida Statute	s, the ab	ove	3-named or	orporation submits this statement for the purpose	of changing	its registered
agent. La	egistered agent, or both, in the s m familiar with, and accept the o	bligations of, Sect	ion 607.0505, Flo	rida Statu	utes	ти <del>ю</del> согро 3.	orporation submits this statement for the purpose oration's board of directors. I hereby accept the a	ррошинон аз	registered
SIGNATURE									
	Signature typed or purited harno of registare				Age	nt signature re	equired when reinstaling) DATE		
12.		AND DIRECTORS		13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO Change	RS IN 12 Addition
TITLE	D D		☐ DELETE	1.1 T(1				L. Change	L Addition
NAME	DUMAS, EMILE			1.2 NA					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 334	420	DELETE	1.4 CIT		T- ZIP		Change	Addition
TITLE			☐ DELETE	2.1 T(T				□ Change	
NAME				2.2 NA					
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			TT prietr	2. 4 CI		ST - ZIP		Change	Addition
TITLE			DELETE	3.1 TIT				☐ Change	
NAME				3.2 NA					
STREET ADDRESS						ADDRESS		•	
CITY - ST - ZIP			Dipriese	3.4. CI		ST-ZIP		Change	Addition
TITLE			DELETE	4.1 1(1				L Change	LI ADDITION
NAME				4. 2 NA					ļ
STREET ADDRESS						ADDRESS			
CITY - ST - ZIP			Dr. Preserve	4.4 CIT		T- ZIP		Dhane-	Addition
TITLE			DELETE	5.1 T(T				☐ Change	L_J Addition
NAME				5.2 NA					
STREET ADDRESS				5.3 STI	REET	ADDRESS			
CITY - ST - ZIP				5.4 C/T		T-ZIP			
TITLE			DELETE	6.1 T∤T				☐ Change	Addilion
NAME				6.2 NA	ME				
STREET ADDRESS				6.3 STI	REET	ADDRESS			
CITY-ST-ZIP				6.4 CIT	[Y-\$1	iT-ZIP			

14. I 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 truet or supplemental annual 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 audress.

SIGNATURE:

4/10/98 (561) 732 7937