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CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700086891 (3)

QUALITY GLOVES INC.

Principal Place of Business Mailing Address 2817 FORMOSA BLVD 2817 FORMOSA BLVD

FILED Apr 17 1998 8:00am Secretary of State



KISSIMMEE FL 34747 KISSIMMEE FL 34747 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **AMERILAWYER** 81 Name 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 **CORAL GABLES FL 33134 B3** 84 City 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 pocare the abligations of, Section 607.0505, Florida Statutes. SIGNATURE Signifiure, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change TITLE CHEN, ALEX C.F. NAME 1.2 NAME 2817 FORMOSA BLVD STREET ADDRESS 1.3 STREET ADDRESS KISSIMMEE FL 34747 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE HON, KOK-KEE NAME 2.2 NAME 2817 FORMOSA BLVD STREET ADDRESS 2.3 STREET ADDRESS KISSIMMEE FL 34747 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE LEE, CHAI-LING 3.2 NAME NAME 2817 FORMOSA BLVD STREET ADDRESS 3.3 STREET ADDRESS KISSIMMEE FL 34747 CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TATLE 4.1 TITLE CHEN, KING S NAME 4. 2 NAME 2817 FORMOSA BLVD STREET ADDRESS 4.3 STREET ADDRESS KISSIMMEE FL 34747 CITY-ST-ZIP 4.4 City-St-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 p) an attachment with an address.

tel hans

ALEX CHEN

4/12/98