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

FILED Aug 03 1998 8:00am PROFIT ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000092739 (6) 1. Corporation Name Quest of Quietude Venture\$, Inc. Principal Place of Business 3615 Boca Clega Dr. Mailing Address c/o Gary H. Feder, Esq. 231 S. Bemiston, 8th Floor Apt. 112 DO NOT WRITE IN THIS SPACE Naples, Florida 34112 St. Louis, MO 63105 3. Date Incorporated or Qualified 10/27/97 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 21 c/o Gary H. Feder, Esq. Suite, Apt. #, etc. \$8.75 Additional Suite, Ant #. etc 5. Certificate of Status Desired Fee Required 231 S. Bemiston, 8th Floo 22 City & State 6. Election Campaign Financing \$5.00 May Be St. Louis, MO Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible Zip Country Yes 63105 Personal Property Tax due June 30. 30 USA 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Geraldine F. Fisher 82 Street Address (P.O. Box Number is Not Acceptable) 3615 Boca Ciega Drive 83 Apartment 112 Naples, Florida 34112 84 Zip Code City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or posted name of represent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition 1.1 10LF DELETE TITLE Director 1.2 NAME NAME Geraldine F. Fisher 1.3 STREET ADDRESS STREET ADDRESS **36**15 Boca Ciega Drive, Apt. 112 1.4 CITY - ST - ZIP CITY-ST-ZIP Naples, FL 34112 -----Change Addition 2.1 TITLE TITLE 2.2 NAME (eraldine F. Fisher NAME 2.3 STREET ADDRESS STREET ADDRESS 3615 Boca Ciega Drive, Apt. 112 2. 4 CITY - S1 - ZIP CITY-ST-ZIP Naples, FL 34112 Change Addition 31 TITLE TIFLE Secretary 3.2 NAME NAME Geraldine F. Fisher 3 3 STREET ADDRESS STREET ADDRESS 3615 Boca Ciega Drive, Apt. 112 3.4. C(TY - ST - 7)P CHTY-ST-ZIP Naples, FL 34112 DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-7IP 400002610124 Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME -08/07/98--01004--**01**9 5.3 STREET ADDRESS STREET ADDRESS \*\*\*550.00 5.4 CITY - ST - ZIP CITY+ST-2IP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

**6.3 STREFT ADDRESS** 

6.4 CITY - ST - 7IP 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 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 altachment with an address.

STREET ADDRESS

CITY-ST-2IP