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 #

P97000095498 (6)

QUESTOR, INC.

Principal Place of Business

Mailing Address

385 FAST MARVIN AVENUE

385 FAST MARVIN AVENUE

FILED Apr 10 1998 8:00am Secretary of State



LONGWOOD FL 32750		LONGWOOD FL 32750			
				DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		11/07/1997 4. FEI Number	1 According
21 240 8		26 2408 KIM	REPIN LE	59-3476393	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	DEVEL SV		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	TONA FL	City & State 28 BELTONA	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
	VOLUSIA	29 30-/3 G	30 VOLUSIA		Yes X No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered	
AMERILAWYER 343 ALMERIA AVENUE 81 Na 82 Str				JOSEPH G. RICHARDSO	N
	3 ALMERIA AVENUE DRAL GABLES FL 33134		82 Street	Address (P.O. Box Number is Not Acceptable)	
			83		
			84 City 1		85 Zip Code
				SELTONA FI	L 1 3み7.78
11. Pursuant office or r	to the provisions of Sections 607.050; registered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida. Such change was a	es, the above-named outhorized by the corn	corporation submits this statement for the purpose poration's board of directors. I hereby accept the appropriate the submits and the submits of the submits	of changing its registered appointment as registered
agent. i a			rida Statules.	(1.5) a (A.5.) =	,
SIGNATURE	Signature, typic or printed name of registered age	500 ~0000v	EPH G.KIC	4ARASOWPRESIDENT	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	The state of the s	Change Addition
NAME	RICHARDSON, JOSEPH G		1.2 NAME	and the same has	•
STREET ADDRESS	385 EAST MARVIN AVENUE		1.3 STREET ADDRESS	2408 KIMBERLY DR	
CITY-ST-ZIP	LONGWOOD FL 32750		1.4 CITY-ST-ZIP	2408 KIMBERLY DR DELTONA, FL 32738	
TITLE	STD	DELETE	2 1 THILI	WILSON, DAVID L.	Change M Addition
NAME	HARRIS, THOMAS R		22 NAME	WILSON, DAVID L.	
STREET ADDRESS	385 EAST MARVIN AVENUE		2.3 STREET ADDRESS	ORLANDO, FL 32806	
CITY-ST-ZIP	LONGWOOD FL 32750	- Inciese	2. 4 City-St-ZiP	OKLANDO, FL 32806	
TITLE		☐ DELETE	3 1 1HLE		Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-S1-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST- ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or hanged, or hin at amortivent with an address. (CODE 24)