**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000099208

QUANDT ENTERPRISES, INC.

407.1107					_				
Principal Place	e of Business	Mailing Address				( (PE(-186 )    (SI)   (SE)   (SE)	8131 <b>98</b> 111 88118	, a	10101 1011 1001
6913 WESTSHORE DR 6913 WESTSHORE DR #124									
ORLANDO FL 32810 ORLANDO FL 32810					DO NOT WRITE IN THIS SPACE				
US US					3. Date Incorporated or Qualifed				
					ĺ	11/21/1997			ĺ
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Api	plied For
21 11150 44/ St N 26 11150 4/h				St N.		59-3479747		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 3011				<u> </u>		5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State  City & State  City & State  23 57 Perfers buses Fl 28 54 Perfers b				(P)		<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>		\$5.00 Added to	
Zîp	Country	Zip		ntry		8. This corporation owes the cur	rrent year Ini	tangible	
$\frac{1}{24}$ $\frac{3}{3}$ 7/ $\frac{1}{25}$ $\frac{1}{1}$ 5 $\frac{1}{29}$ $\frac{3}{3}$ 7/ $\frac{1}{5}$ $\frac{1}{30}$				<b>\</b> C	ļ	Personal Property Tax.	-	Yes	□No
24, 0 -	9. Name and Address of Curren	_ \=				10. Name and Address of New	Registered	Agent	
<del></del>		<u> </u>		81 Name		•			
QUA	ndt, kenneth a			<u> </u>				<u> </u>	
6913 WESTSHORE DR					Addres	s (P.O. Box Number is Not Accep	table)	·	
#124				83					1
ORLA	ANDO FL 32810			84 City		· ,	FL.	85 Zip C	ode
office or re agent. I an SIGNATURE	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obligat	of Florida. Such change was tions of, Section 607.0505, F	authorize Iorida Stat	I DV the com	oration	s board of directors. Thereby acce	pt the appoi	ntment as reg	gistered
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registr OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			RS IN 12	
TITLE	PSTD	DELETE	1.1 T	n F	PST				Addition
			12 N		12	neth A. Quan 50 4+6 5+. N.	ر کا لجے		
NAME	QUANDT, KENNETH A				17/	=0 446 St.N.	# 301	1	1
STREET ADDRESS	0010 110010110110 211 11 121		REET ADDRESS	1//	· PRtessburg (	, 70	716-2	902	
CITY-ST-ZIP			TY-ST-ZIP	13 1	. PRtersburg (	1 00	Cl Change	Addition	
TITLE		☐ DELETE	2.1 T			,		C) Citalige	
NAME			2.2 N	ME					
STREET ADDRESS	DORESS 2.3		2.3 \$	REET ADDRESS	il				ľ
CITY-ST-ZIP			- 2.40	ITY-ST-ZIP	<u> </u>				
TITLE	☐ DELETE 3.11		ΠLE				Change	☐ Addition	
NAME			32 N	AME		• •			
STREET ADDRESS	DDRESS 3.3		3.3 S	REET ADDRESS	;				
CITY-ST-ZIP			3.4. 0	ITY-ST-ZIP	(				
TITLE		☐ DELETE	4.1 Ti					Change	☐ Addition
NAME			4.21	AME					
STREET ADDRESS			4.3 S	REET ADDRESS					
CITY-ST-ZIP				TY-ST-ZIP					
TITLE		☐ DELETE	5.1 Ti		$\vdash$	<del></del>		Change	Addition
NAME			5.2 N			•			
			1	REET ADDRESS					
STREET ADDRESS				TY-ST-7IP					1

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 aftachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

(727)570 2895

Change

☐ Addition

**FILED** Feb 25, 1999 8:00 am

Secretary of State

02-25-1999 90077 010 \*\*\*150.00