2790 Sunset Point Road Clearwater, Florida 33759 ATTORNEY-AT-LAW (813) 712-1228 FAX (813) 712-8811

## P98000019304

April 27, 1999

Secretary of State Bureau of Corporation P.O. Box 6327 Tallahassee, Florida 32314

Re: QUANTUM TECHNOLOGIES OF AMERICA, INC.
Change of Registered Agent

Gentlemen:

Please find enclosed a Statement of Change of Registered Office or Registered Agent or Both for Corporations, along with a check in the amount of \$35.00 for your fee.

Thank you for your assistance in this matter.

Very truly yours,

Ruth D. Knight

Secretary to Robert L. Shear

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Enclosures

rdk

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508 the undersigned corporation organized under the laws of the State of _	
submits the following statement in order to change its registered office the State of Florida.  1. The name of the corporation is:  Q-TEK NETWORK, INC.	
•	
2. The mailing address of the corporation is: 4899 - B WEST WA	TERS AVENUE
TAMPA, FL 33634-1304	· · · · · · · · · · · · · · · · · · ·
3. Date of incorporation/qualification: 2/27/1998 Docum	nent number: P9800001930 4
4. The name and address of the current registered agent and office:	
MIKE HUNTER	99) ALL/
4899 - B WEST WATERS AVENUE	
mawna mr 22624 1204	
5. The name and address of the new registered agent and office: (P. O.	Box Not Acceptable)
ROBERT SHEAR	C S IV. C
2790 SUNSET POINT-ROAD	<u> </u>
CLEARWATER, FL 33759	
The street address of its registered office and the street address of the agent, as changed, will be identical.	business office of its registered
Such change was authorized by resolution duly adopted by its board authorized by the board.	
(Signature of an officer, chairman or vice chairman of the board)	(Date)
DAVID R. MURPHY, PRESIDENT	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of processory of the corporation, I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statutes relative to performance of my duties, and I am familiar with and accept the obliced in the control of the con	ress for the above stated defeated agree to act in this capacity. The proper and complete gation of my position as
x 190014(1) 4/3	7/99
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)

\* \* \* FILING FEE: \$35.00 \* \* \*