

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 26, 2002 8:00 am
Secretary of State

06-26-2002 90071 019 ***150.00

DOCUMENT # P99000053562

1. Entity Name
Q & S ASSEMBLIES, INC.

Principal Place of Business Mailing Address
9378 ARLINGTON EXPRESSWAY 9378 ARLINGTON EXPRESSWAY
SUITE 358 SUITE 358
JACKSONVILLE-FL-32225 JACKSONVILLE FL 32225

2. Principal Place of Business 3. Mailing Address
3122-5 LEON ROAD 3122-5 LEON RD
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
JACKSONVILLE, FL JACKSONVILLE, FL
 Zip Country Zip Country
32246 USA 32246 USA

4. FEI Number **59-3582262** Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
 Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
PALMERO, VINCENT Name
9378 ARLINGTON EXPRESSWAY Street Address (P.O. Box Number is Not Acceptable)
SUITE 358
JACKSONVILLE FL 32225 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE Vincent Palermo DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PVST	<input type="checkbox"/> Delete	TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMERO, VINCENT		NAME	PALMERO VINCENT	
STREET ADDRESS	9378 ARLINGTON EXPRESSWAY, SUITE 358		STREET ADDRESS	3122-5 LEON ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32225		CITY-ST-ZIP	JACKSONVILLE FL 32246	
TITLE	D	<input type="checkbox"/> Delete	TITLE	PALMERO VINCENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMERO, VICENT		NAME	PALMERO VINCENT	
STREET ADDRESS	9378 ARLINGTON EXPRESSWAY, SUITE 358		STREET ADDRESS	3122-5 LEON ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32225		CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vincent Palermo 6/24/02 904-537-3308
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment
PH # 4400053562
BD 25882

QTS ASSEMBLIES INC
3122-5 LEON ROAD
JACKSONVILLE, FL 32246
6-24-02

TO: TYRONE SCOTT
FLA DEPT OF REVENUE.

DEAR MR SCOTT.

IN REFERENCE TO MY PAYMENT + NO FORM.
I COULD NOT FIND MY FORM. MY ACCOUNTANT
CALLED TO REMIND ME OF THE DUE DATE.
SINCE THEN I DID FIND MY FORM FILED
IN LAST YEARS PAPERS. THE REASON YOU ARE
ONLY RECEIVING THIS LETTER NOW IS I
HAVE MOVED AND YOUR LETTER WAS NOT FORWARDED
IN TIME. I HAVE ONLY RECEIVED YOUR LETTER
ON 6-21-02.

ENCLOSED IS THE ORIG FORM AND PAYMENT
RETURNED AND CHANGES MADE.

THANK YOU
Vernon Palmer.

P.S. PRINTER OUT OF INK.