

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P990000061471

1. Entity Name

QUANTUM ENGINEERING SERVICES, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90032 010 ***150.00

Principal Place of Business

Mailing Address

2915 S.E. RANCH ACRES CIRCLE
JUPITER FL 33478

2915 S.E. RANCH ACRES CIRCLE
JUPITER FL 33478-1906

2. Principal Place of Business

3. Mailing Address

2915 S.E. RANCH ACRES CR
Suite, Apt. #, etc.

2915 S.E. RANCH ACRES CR
Suite, Apt. #, etc.

City & State
JUPITER FL
Zip
33478
Country
USA

City & State
JUPITER FL
Zip
33478
Country
USA

4. FEI Number

65-0929266

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

METRISIN, JOSEPH T
2915 S.E. RANCH ACRES CIRCLE
JUPITER FL 33478

Name

Street Address (P.O. Box Number is Not Acceptable)

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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	PDST	<input type="checkbox"/> Delete
NAME	METRISIN, JOSEPH T	
STREET ADDRESS	2915 S.E. RANCH ACRES CIRCLE	
CITY-ST-ZIP	JUPITER FL 33478	
TITLE	V	<input type="checkbox"/> Delete
NAME	METRISIN, KELLY J	
STREET ADDRESS	2915 S.E. RANCH ACRES CIRCLE	
CITY-ST-ZIP	JUPITER FL 33478	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Signature of Joseph T. Metrisin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/00 (561) 799-6690
Date Daytime Phone #

X234

CR2E034 (9/99)