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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

QUIK DRAW HOLSTER SYSTEM, INC.

(6)

FILED Mar 31 1998 8:00am Secretary of State



Principal Place of Business 1201 SOUTH OCEAN DRIVE 811 N HOLLYWOOD FL 33019 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/07/1991 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For Suite, Apt. #, etc Suite, Apt. #, etc 27. City & State City & State City & State Zip Country Country Amiling Address 6. Election Campaign Financing Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible									
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11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent and finit of a purpose was authorized by the corporation is board of directors. I hereby accept the appointment as registered office of the purpose of changing its regist			nt Registered Agent				10. Name and Address of New Re	agistered Agent	
HOLLYWOOD FL 33019 Ba				ĺ	81 Name				
11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutas, the above-named corporation submite this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutos. SIGNATURE SIGN				82 Street		Street Addre	ss (P.O. Box Number is Not Accepta	ble)	
B4 City FL 85 Zip Code	HU	ELTWOOD PL 33019		}	93				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Change is stated. In the state of the purpose of changing its registered agent, or both, in the State of Change is stated. In the state of the purpose of changing its registered agent, or both, in the State of Change is stated. In the state of the purpose of changing its registered agent, or both, in the State agent agent are application's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Change is stated. In the state of the purpose of change is stated. In the state of the purpose of changing its registered agent, or both in the application is purpose of change in the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the state of the purpose of change is stated. In the stated of the purpose of change is stated or the purpose of change is stated. In the stated of the purpose of change is stated or the purpose of change is stated or				l	83				
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indicated on this annual report or supplied with his hind does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Truther 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 on 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 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 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 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 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 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 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 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 12 or Block 13 if changed, or the receiver or trustee empower as required by Chapter 607, Florida Statutes; and the receiver of the receiver or trustee empower as required by the receiver of the receiver or trustee empower or trustee empower or trustee empower as required by the receiver of the receiver or trustee empower or truste

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