

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S51195** (3)

1. Corporation Name
QUALITY TOOTERS, INC.

Principal Place of Business: **1644 LAKE DRIVE
COCOA FL 32926-5218**
Mailing Address: **25 SOUTH ATLANTIC AVENUE
COCOA BEACH FL 32931
US**

(DO NOT WRITE IN THIS SPACE)

| | | | | | |
|--------------------------------|---------------------|---------------------|---------------------|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 05/06/1991 | 3a. Date of Last Report 07/26/1994 |
| 21 | | 26 | | 4. FEI Number 59-3074612 | Applied For Not Applicable |
| 22 | State, Apt. #, etc. | 27 | State, Apt. #, etc. | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 23 | City & State | 28 | City & State | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 24 | Zip | 29 | Zip | 7. The corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Country | | Country | | |

| | | | | | | | |
|--|--|--|--|--|--|-----------|----|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| LINGO, JOHN 25 SOUTH ATLANTIC AVENUE COCOA BEACH FL 32931 | | | | B1 | Name | | |
| | | | | B2 | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | | B3 | | | |
| | | | | B4 | City | FL | B5 |

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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **5/1/95**

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------------|---|---|
| FILE | D | 1. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ROYTMAN, STEPHEN H. | 2. NAME | |
| STREET ADDRESS | 1644 C LAKE DRIVE | 3. STREET ADDRESS | |
| CITY, ST. ZIP | COCOA FL | 4. CITY, ST. ZIP | |
| FILE | D | 5. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LINGO, JOHN | 6. NAME | |
| STREET ADDRESS | 25 SOUTH ATLANTIC AVENUE | 7. STREET ADDRESS | |
| CITY, ST. ZIP | COCOA BEACH FL | 8. CITY, ST. ZIP | |
| FILE | | 9. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 10. NAME | |
| STREET ADDRESS | | 11. STREET ADDRESS | |
| CITY, ST. ZIP | | 12. CITY, ST. ZIP | |
| FILE | | 13. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 14. NAME | |
| STREET ADDRESS | | 15. STREET ADDRESS | |
| CITY, ST. ZIP | | 16. CITY, ST. ZIP | |
| FILE | | 17. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 18. NAME | |
| STREET ADDRESS | | 19. STREET ADDRESS | |
| CITY, ST. ZIP | | 20. CITY, ST. ZIP | |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information included 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 holder empowered to execute this report as required by Chapter 127, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or on an affidavit with an address.

SIGNATURE: *[Signature]* **5/1/95**
SIGNATURE AND TYPED OR PRINTED NAME OF GOING OFFICER OR DIRECTOR