

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V17774 (3)

1. Corporation Name

QUICK COMMUNICATION SYSTEMS, INC.



Principal Place of Business

Mailing Address

8250 W. FLAGLER ST
120-A
HOMESTEAD FL 33144
US

25782 S.W. 123RD PLACE
HOMESTEAD FL 33032

3. Date Incorporated or Qualified

03/02/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0321523

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 27828 SW 127 AVE

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Homestead, FL 33032

28 Zip

24 Zip Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DELAHOZ, GUSTAVO
25782 S.W. 123RD PLACE
HOMESTEAD FL 33032

81 Name

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

83

84 City

FL 85 Zip Code

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME DELAHOZ, GUSTAVO
STREET ADDRESS 25782 S.W. 123RD PLACE
CITY - ST - ZIP HOMESTEAD FL

TITLE V ☐ DELETE

NAME DELAHOZ, ANNETTE
STREET ADDRESS 25782 S.W. 123 PL
CITY - ST - ZIP HOMESTEAD FL

TITLE V ☐ DELETE

NAME DELAHOZ, CARLOS
STREET ADDRESS 3060 S.W. 104 CT
CITY - ST - ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

GUSTAVO E. DELAHOZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

724-96 (305) 257-9927

CR2E034 (3/96)