



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3046



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 76881 2. Name of Corporation Quantum International Group, Inc.  
3. Street Address Principal Business Office 2310 Pawtucket Avenue City East Providence State RI Zip 02914  
4. Business Phone No. 401-434-2707 5. State of Incorporation Delaware 6. SIC Code 5744  
7. Brief Description of the Character of Business Conducted in Rhode Island  
Forensic Accounting and Litigation Support to insurance & banking organizations

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Michael F. Sparfven Vice President Name None  
Street Address 42 Metacomet Avenue Street Address   
City E. Providence State RI Zip 02914 City  State  Zip

Secretary Name Hollie R. Lawton Treasurer Name None  
Street Address 101 Salisbury Avenue Street Address   
City No. Kingstown State RI Zip 02852 City  State  Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Michael F. Sparfven Director Name None  
Street Address 42 Metacomet Avenue Street Address   
City E. Providence State RI Zip 02914 City  State  Zip

| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) |              |           | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) |              |           |
|------------------------------------------------|--------------|-----------|--------------------------------------------|--------------|-----------|
| AUTHORIZED SHARES                              |              |           | ISSUED SHARES                              |              |           |
| Number of Shares                               | Class/Series | Par Value | Number of Shares                           | Class/Series | Par Value |
| 8,000                                          | Common       | .010000   | None                                       |              |           |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

File Date: FILED

Check No.: MAY 1 1999

By: By [Signature] 223045

FOR SECRETARY OF STATE USE ONLY

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RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV.

Hollie R. Lawton 5/11/99  
Signature of Officer Date

Hollie R. Lawton  
Print or Type Name of Officer

Secretary  
Title of Officer