

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067666

FILED
Sep 09, 2004
Secretary of State

Entity Name: CLASSQUEST CORPORATION

Current Principal Place of Business:

1080 N.W. 78 AVE
FORT LAUDERDALE, FL 33322

New Principal Place of Business:

Current Mailing Address:

1080 N.W. 78 AVE
FORT LAUDERDALE, FL 33322

New Mailing Address:

320 S. SURF ROAD
704
HOLLYWOOD, FL 33019

FEI Number: 65-0854310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLSON, EDWARD
1080 N.W. 78TH AVENUE
FORT LAUDERDALE, FL 33322 US

Name and Address of New Registered Agent:

TOLSON, LOUISE
320 S SURF RD
704
HOLLYWOOD, FL 33019 US

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: LOUISE TOLSON

09/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: TOLSON, EDWARD
Address: 1080 N.W. 78TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: TOLSON, LOUISE
Address: 320 S SURF RD STE 704
City-St-Zip: HOLLYWOOD, FL 33019

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUISE TOLSON

PSD

09/09/2004

Electronic Signature of Signing Officer or Director

Date