

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2004 8:00 am
Secretary of State

08-16-2004 90019 042 ***550.00

DOCUMENT # P94000070939

1. Entity Name

QUEST INTERNATIONAL, INC.



Principal Place of Business

1938 NE 148 TERR
NO MIAMI FL 33181
US

Mailing Address

1938 NE 148 TERR
NO. MIAMI FL 33181
US

54068409



MOORE

CR2E034 (4/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0522334

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORT, ROBERT
1938 NE 138 TERR
NO. MIAMI FL 33181

7. Name and Address of New Registered Agent

Name

OSCAR COMPAIN

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

1938 N.E. 148 TERRACE

City

NORTH MIAMI

FL

Zip Code

33181

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete
NAME CORT, ROBERT A
STREET ADDRESS 3271 SW 53-ST
CITY-ST-ZIP HOLLYWOOD FL 33312

TITLE V ☐ Delete
NAME KIEFER, DAVID J
STREET ADDRESS 828 LAKE DRIVE
CITY-ST-ZIP MIAMI SPRINGS FL 33166

TITLE S ☒ Delete
NAME TROY, SANDRA
STREET ADDRESS 2320 N.E. 215TH ST.
CITY-ST-ZIP NORTH MIAMI FL 33180

TITLE V ☐ Delete
NAME COMPAIN, OSCAR
STREET ADDRESS 6861 SW 95 AVE
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

OSCAR R. COMPAIN

8/10/04 3059488788

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #