

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 22, 2007  
Secretary of State**

DOCUMENT# P00000024735

Entity Name: J.C.Q. SERVICES, INC.

**Current Principal Place of Business:**

1135 OCOEE APOPKA RD  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

1135 OCOEE APOPKA RD  
APOPKA, FL 32703 US

**New Mailing Address:**

FEI Number: 59-3629487      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

QUIROGA, JUAN C  
1841 THOROUGHbred DRIVE  
GOTHA, FL 347345133 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: QUIROGA, JUAN C  
Address: 1841 THOROUGHbred DRIVE  
City-St-Zip: GOTHA, FL 347345133 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PVST ( ) Change (X) Addition  
Name: QUIROGA, JUAN C  
Address: 1135 OCOEE APOPKA RD  
City-St-Zip: APOPKA, FL 32703

Title: PVST ( ) Change (X) Addition  
Name: QUIROGA, JUAN C  
Address: 1135 OCOEE APOPKA RD  
City-St-Zip: APOPKA, FL 32703

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City-St-Zip: APOPKA, FL 32703

Title: PVST ( ) Change (X) Addition  
Name: QUIROGA, JUAN C  
Address: 1135 OCOEE APOPKA RD.  
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JUAN CARLOS QUIROGA

PVST

08/22/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date