2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007055

Entity Name: QQAGENCY, INC.

FILED Apr 11, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
17800 ROYALTON ROAD STRONGSVILLE, OH 44136				250 EAST FIFTH STREET CINCINNATI, OH 45202		
Current Mailing Address:				New Mailing Address:		
17800 ROYALTON ROAD STRONGSVILLE, OH 44136				250 EAST FIFTH STREET CINCINNATI, OH 45202		
FEI Number:	34-1920453	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:
1201 HAYS TALLAHAS The above	SSEE, FL 3230	012525 US	pose o	f changing it	ts registered	office or registered agent, or both,
SIGNATUF	RE:					
	Electron	ic Signature of Registered Agent	[Date
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address:	WOLFRAM, BR. 17800 ROYALTO STRONGSVILLE S () BLACKWELL, D 17800 ROYALTO	ON RD E, OH 44136 Delete JENISE A ON ROAD		Title: Name: Address: City-St-Zip: Title: Name: Address:	HILL, JR., BI 5508 PARKO AUSTIN, TX SD MUETHING, I 250 EAST FI	REST DRIVE 78731 (X) Change()Addition MARK F FTH STREET
City-St-Zip: Title: Name: Address: City-St-Zip:	T () CANZONE, DAV 17800 ROYALT STRONGSVILLE	Delete ID A ON RD		City-St-Zip: Title: Name: Address: City-St-Zip:		(X) Change()Addition IRISTOPHER P FTH STREET
Title: Name: Address: City-St-Zip:	VP () GLORIA, WILLIA 17300 RAYALT STRONGSVILLE	ON RD		Title: Name: Address: City-St-Zip:	MISCHELL, 7	OURTH STREET, 8TH FLOOR
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D PRAGER, MI 525 VINE ST CINCINNATI,	REET
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D SCHEPER, C 250 EAST FI CINCINNATI,	FTH STREET

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E. MISCHELL AT 04/11/2007