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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F78751

1. Corporation Name
J.B.Q, INC

Principal Place of Business / Mailing Address

2455 E. Sunrise Blvd.
Penthouse North
Ft. Lauderdale, FL 33304

3. Date Incorporated or Qualified: 5/4/92
3a. Date of Last Report:

2. Principal Place of Business — 90 Venis
21 Street Address: 2455 E. Sunrise Blvd
22 Suite, Apt. #, etc.: Penthouse North
23 City & State: Ft. Lauderdale, FL
24 Zip: 33304
25 Country: USA

2a. Mailing Address — 90 Venis
26 Street Address: 2455 E. Sunrise Blvd
27 Suite, Apt. #, etc.: Penthouse No.
28 City & State: Ft. Lauderdale, FL
29 Zip: 33304
30 Country: USA

4. FEI Number: 592188102 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
Eric S. Glatter
1499 W. Palmetto Park Rd., Suit 300
Boca Raton, FL 33486

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 4/4/97
Signature of new registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President, Secretary, Director ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Geraldine B. Dorfner	1.2 NAME	
STREET ADDRESS	2455 E. Sunrise Blvd. PH No	1.3 STREET ADDRESS	
CITY-ST-ZIP	Ft. Lauderdale, FL 33304	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	900002152629
STREET ADDRESS		6.3 STREET ADDRESS	-04/23/97--01100--018
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***165.00

PW 4-22-97

CR2E034 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Geraldine B Dorfner 4/4/97 954-746-2990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Geraldine B. Dorfner