SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # F9400002099 (9)

APPROVED AND FILED

1997 JUL 18 PM 1: 30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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AQC, INC. Principal Place of Business Mailing Address 245 EAST DRIVE 245 EAST DRIVE MELBOURNE FL 32804 MELBOURNE FL 32804 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 3a. Date of Last Report 04/22/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 36-3948687 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zφ Country Zip This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 85 Zip Code FL 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, typod or printed name of registered agont and title if applicable. (NO18: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (4/97 Addition 🔲 DELETE Change THLE 1.1 TITLE WEDNER, MARCUS D ANDREW J. BAHNPLETH NAME 1.2 NAME 231 S. LASALLE ST 245 EAST DPIVE STREET ADDRESS 1.3 STREET ADDRESS CHICAGO IL MELBOUPNE, PL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE STEIN, AVY NAME 2.2 NAME 400002241664--4 231 S. LASALLE ST STREET ADDRESS 2.3 STREET ADDRESS -07/18/97--01084--018 CHICAGO IL CITY-ST-ZIP 2.4 CITY-\$1-ZIP ****550**,**00-PD DELETE TITLE 3.1 TITLE STEVENS, BRUCE C NAME 3.2 NAME 200 S. WACKER DR., SUITE 3850 STREET ADDRESS 3.3 STREET ADDRESS CHICAGO IL CITY-ST-ZIP 3.4. C(1Y - ST-ZIP TITLE DELETE 4.1 TITLE Change Addition ROSSI, CHARLES A JR 4 2 NAME NAME 245 EAST DRIVE STREET ADDRESS 4.3 STREET ADDRESS MELBOURNE FL 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE FRIEDEL, LEONARD G NAME 5.2 NAME 200 S. WACKER DR. SUITE 3850 STREET ADDRESS 5.3 STREET ADDRESS CHICAGO IL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITL€ Change Addition TITLE STANTON, GARY O NAME 6.2 NAME 245 EAST DRIVE STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP MELBOURNE FL

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 depropration 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 chapted on on an attachment with an address.

10/9/10 MILLER DE POLICION (VD) 7/17/97 (407)7500711