

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Feb 16, 2004 08:00 AM

Secretary of State

DOCUMENT # F98000005866

1. Entity Name

Q INTERNATIONAL COURIER, INC.



Principal Place of Business

175-28 148TH AVENUE
JAMAICA, NY 11434

Mailing Address

175-28 148TH AVENUE
JAMAICA, NY 11434

DO NOT WRITE IN THIS SPACE



01292004

No Chg-P

CR2E034 (10/03)

4. FEI Number

23-2160093

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DERLE, DON
200 WAYMONT COURT
SUITE 126
LAKE MARY, FL 32746

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCD
MITZMAN, ROBERT
212 5TH AVENUE, 18TH FL
NEW YORK, NY 10010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
SCHINIK, RONALD S
212 5TH AVENUE, 18TH FL
NEW YORK, NY 10010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
BROWN, DOMINIQUE
212 5TH AVENUE, 18TH FL
NEW YORK, NY 10010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000054129
02/16/04-80158-011 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT

Date

Daytime Phone #

Dominique Brown DOMINIQUE BROWN 1/29/04 7189953646