


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000064366
 1. Entity Name
 KORSCH INVESTMENTS/SRQ, INC.



Principal Place of Business
 5119 JUNGLE PLUM ROAD
 SARASOTA, FL 34242

Mailing Address
 5119 JUNGLE PLUM ROAD
 SARASOTA, FL 34242

DO NOT WRITE IN THIS SPACE



05022008 No Chg-P CR2E034 (11/05)

4. FEI Number
 65-1027321 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

KORSCH, FRIEDRICH A
 5119 JUNGLE PLUM ROAD
 SARASOTA, FL 34242

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$ / 50.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000947924
 06/02/08-80035-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KORSCH, FRIEDRICH A
STREET ADDRESS	5119 JUNGLE PLUM RD.
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	KORSCH, HEIDI
STREET ADDRESS	5119 JUNGLE PLUM RD.
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	KORSCH, MARC
STREET ADDRESS	5420 ROYAL POIMCIAMA WAY
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Friedrich A Korsch* 4-30-08 941 349-2277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #