FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000000 78336 FILED 03 OCT 17 PM 12: 49 Q. Productions, Inc SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE ² Principal Place of Business 3875 S.W. 170 Th 3. Mailing Address 900024221469 10/29/03--01006--019 **300.00 Suite, Apt. #. etc. Suite, Apt. #, etc. Hity & State
HITAMUT City & State 5-1033820 Not Applicable Country Country \$8.75 Additional 33027 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Ponso (hintero DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 3875 SW 1707h Miramar 8. The above named onlig submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Lam familiar with, and accept the obligation and registered agent. (30) E: Regatered Agent signature required when resistating) DATE January 1 - May 1 Fee is \$150:00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS THU CR2E034B (12/02) TITLE NAME HAVE S.W. 170 th Ava STREET ADDRESS STREET ADDRESS CHY-31-7/2 CITY-\$1-ZIP me mir HAME HAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CHTYRST-ZIP TITLE TITLE HAME NAME STREET ADDRESS STEEL ADDRESS DO NOT WRITE CITY-ST-ZIP CHTY-ST-ZIP 11713 TITLE IN THIS SPACE HAME NAME STREET ACCORESS STREET ADDRESS CHY-ST-ZIF CUY-SI-ZIP TITLE TITLE MAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-ZIP TITLE TITLE HAME HAME. STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CUYEST-ZIP 12. I heliaby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the information indicated on this report of supplymental 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 exploration rules empowered to execute this report as required by Chapter 607, Florida Statules: and that my name appears in Block 10 or on an attachment with an address, with all other like empowered. SIGNATURE: Daytorea Phone #

Division of Corporations P.O. BOX 6327 Tallahassee, FL 32314

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Per instructions from Division of Corporations, I am attaching a check in the amount of \$150.00 for the annual report fee with my application.

I also state that on December 08 2002 We change our address but the U.B.R. for the year 2003 was never received or any other notice from the Division of Corporations in respect with my Corporation J.Q. PRODUCTIONS, INC

Thank you for your courtesy in this matter.

PAULA SANTA SECRETARY