2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000086567



FILED Sep 22, 2004 8:00 am Secretary of State

1. Entity Name THE AVQUEST CORPORATION					09-22-200-	4 90002 04	4 ***15	50.00	
Principal Place of Business -8652 LARWIN LANE ORLANDO, FL 32817		Mailing Address P-0. BOX 5156 WINTER PARK, FL-32793				240860)		
2. Principal Pl 321 N Suite, Apt.		3. Mailing Address 340 Killarney Bay Cl Suite, Apt. #, etc.		09172004					
204			, City & State		Chg-P	CR2E034		lind For	
Orland	do, the	Winter Park		4. FEI Number 59-367				Applicable	
3280	3 Country	32789 C	ountry USA	5. Certificate	of Status Desired		.75 Addi Required		
	8. Name and Address of Current F			7. Name and	Address of New R				
TUTTON, MATT									
-8652 LARWIN LANE				Street Address (P.O. Box Number is Not Acceptable) 340 Killarney Bay					
				Winter Park FL Zip Code 32789					
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									
Signature, typed or printed name of registered agent and title if applicable. (INOTE: Registered Agent signature required when renetating)									
PILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees					
10.	OFFICERS AND I		11.	ADDITIONS	CHANGES TO OFF				
title Name	TUTTON MATT		TITLE NAME			L.] Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	8652 LARWIN LANE 340/C	STREET ADDRESS CITY-ST-ZIP					į		
TITLE	STD	·	TITLE] Change	Addition	
NAME STREET ADDRESS	DIBBLEE, JOYCE 8652 LARWIN LANE		NAME STREET ADDRESS						
CITY-ST-ZIP	ORLANDO, FL 32817		CITY-ST-ZIP						
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CITY-ST-ZIP			CITY-ST-ZIP TITLE] Change	☐ Addition	
NAME			NAME			L	T OHATIĞE		
STREET ADORESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling 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.									
_	2004	Signal and other was empowered.		6	8/12/11	Uso	1.11 -1	۷¬、	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OF COLD Days True Phone #									





The Avquest Corporation

"Concierge, travel, & special services when privacy, quality and discretion are foremost"

321 N. Crystal Lake Dr. Suite 204 Orlando, FL 32803 Phone: 407-616-5877
Fax/voicemail: 321-978-9227
Email: mtutton@earthlink.net

September 17, 2004

Division of Corporations

PO Box 1500

Tallahassee, FL 32302=1500

Re: Document #P00000086567

To whom it may concern:

We did not receive the annual report, I went online and filed a report. I called to verify receipt and was told nothing had been received yet every time I went online it would say "You have a Filing on the Que."

My credit card has not been charged, this was the first time since Charley that I could get online to download a form and submit it. Please waive any additional fees.

Thank you for your assistance,

Matt Tutton President

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