

**FILED**  
**Jul 18, 2003 8:00 am**  
**Secretary of State**

07-18-2003 90073 002 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000086909

1. Entity Name

IQ CONSULTING, INC.

90144161

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
 7790 NW 29TH STREET

3. Mailing Address  
 7790 NW 29TH STREET

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
 MARGATE FL

City & State  
 MARGATE FL

4. FEI Number  
 651132738

Applied For  
 Not Applicable

Zip  
 33063

Country  
 USA

Zip  
 33063

Country  
 USA

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

7. Name and Address of Registered Agent

Name  
 A1A REGISTERED AGENT, INC.

Street Address (P.O. Box Number is Not Acceptable)

92 SADBERRY RD.

~~25 SE 2ND AVENUE SUITE 1036~~

City ~~MIAMI~~ QUINCY FL

Zip Code  
 33134 32351

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.

SIGNATURE

PAUL SMITH, VICE-PRESIDENT

07-16-03

Signature, typed or printed name of registered agent, and date if applicable.

(NOTE: Registered Agent signature required when releasing)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES QUEBBEMAN, BRADLEY J 7790 NW 29TH STREET MARGATE FL 33063	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC QUEBBEMAN, HARRY J 7790 NW 29TH STREET MARGATE FL 33063	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: BRADLEY J QUEBBEMAN, P

7/18/03

954-811-5321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #