


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000033324	
1. Entity Name QUICK N EASY, INC.	

Principal Place of Business 36 STOWE RD. MARY ESTHER, FL 32569	Mailing Address 36 STOWE RD. MARY ESTHER, FL 32569
--	--



DO NOT WRITE IN THIS SPACE

04252005 No Chg-P CR2E034 (10/03)

4. FEI Number 11-3683107	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent

SCHOPKE, PAUL H JR
36 STOWE RD.
MARY ESTHER, FL 32569

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOPKE, PAUL H JR. 36 STOWE RD. MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOPKE, PAUL H SR. 100 11TH ST. SE. WINTER HAVEN, FL 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOPKE, WILLIAM R 422 PRIMROSE CIR. DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000334307
04/27/05-80039-014 150.00

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: Paul H. Schopke Jr PAUL H. SCHOPKE JR 4/25/05 850-683-1670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #