

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90430 037 ***150.00

DOCUMENT # P03000036206

1. Entity Name
JRQ ENTERPRISES, INC.



Principal Place of Business

3131 E TAMiami TRAIL
NAPLES, FL 34112

Mailing Address

3131 E TAMiami TRAIL
NAPLES, FL 34112

40060300



2. Principal Place of Business

4619 VERITY LANE

Suite, Apt. #, etc.

B

3. Mailing Address

4619 VERITY LANE

Suite, Apt. #, etc.

B

03062006 Chg-P CR2E034 (11/05)

City & State

NAPLES, FL

City & State

NAPLES, FL

4. FEI Number
26-0063240

Applied For
Not Applicable

Zip

34112

Country

COLLIER

Zip

34112

Country

COLLIER

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

6. Name and Address of Current Registered Agent

FERGUSON, CHARLES E
5380 TAMARIND RIDGE DRIVE
NAPLES, FL 34119

7. Name and Address of New Registered Agent

Name

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

4350 LONGSHORE WAY, S

City NAPLES

FL

Zip Code

34119

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

C. G. Ferguson
C. G. Ferguson

4/19/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME QUINTANILLA, JUAN R
STREET ADDRESS 3131 E TAMiami TRAIL
CITY-ST-ZIP NAPLES, FL 34112

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4619 VERITY LANE APT B
CITY-ST-ZIP NAPLES, FL 34112

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Juan Quintanilla*

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

239-
4-20-06 293-5787