

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2004 8:00 am
Secretary of State

08-30-2004 90002 006 ***150.00

DOCUMENT # P03000083364					
1. Entity Name APQ CREW MANAGEMENT - - ZISA INC.					
Principal Place of Business 2001 NE 183 ST. N. MIAMI BCH. FL. 33179			Mailing Address 2001 N.E. 183 ST. N. MIAMI BCH. FL. 33179		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 43-2022243	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RUBIAS DANILO 2001 N.E. 183 ST. N. MIAMI BCH. FL. 33179			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			State Zip Code		
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)					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALEX QUILLOPE ☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1)					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DANILO RUBIAS ☐ Change ☒ Addition 2001 N.E. 183 ST. N. MIAMI BCH. FL. 33179				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D EVELYN RUBIAS ☐ Change ☒ Addition 2001 N.E. 183 ST. N. MIAMI BCH. FL. 33179				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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: Danilo Rubias 4-30-04					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

To: Attachment
Fla. Dept. of State 54070645-

Re: Doc. # P03000083364

2004 - Annual Report

Dear Sir,

Enclosed check and annual
Report- Form as per your instructions over
the Phone.

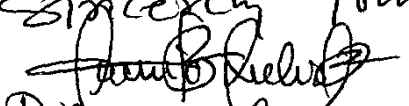
I didn't receive renewal Form
and not a Computer expert. or know too much
about The Computer.

I am worried about my Company
renewal

My friend got one The. printed
Form because I didn't receive a renewal
notice.

Please Waive the late fee
and bring the Corporation Filing Current

Thank You kindly

Sincerely Yours

DANILLO P. PINA