

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2004 8:00 am
Secretary of State

08-24-2004 90002 006 ***558.75

DOCUMENT # P03000096360

1. Entity Name
FHA-Q2, INC.



Principal Place of Business Mailing Address
3078 MARLO BLVD **3078 MARLO BLVD**
CLEARWATER, FL 33759 US **CLEARWATER, FL 33759 US**

54069691

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



04122004 Chg-P CR2E034 (10/03)

4. FEI Number Applied For
20-0197677 Not Applicable

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

6. Name and Address of Current Registered Agent

ERIC, VON HEAL
3078 MARLO BLVD
CLEARWATER, FL 33759

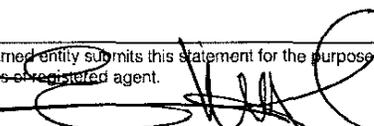
7. Name and Address of New Registered Agent

Name

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

City **FL** 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:  **ERIC VON HEAL** **8-4-04**

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, 2004 Fee will be \$550.00

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

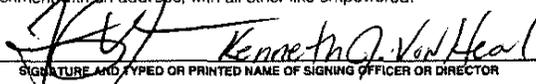
10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	VON HEAL, KENNETH	
STREET ADDRESS	944 HIDDEN DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33809	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BASSFORD, ARTIE	
STREET ADDRESS	P O BOX 5011	
CITY-ST-ZIP	LAKELAND, FL 33807	
TITLE	SEC	<input type="checkbox"/> Delete
NAME	VON HEAL, ERIC	
STREET ADDRESS	3078 MARLO BLVD	
CITY-ST-ZIP	CLEARWATER, FL 33759	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VON HEAL, KENNETH	
STREET ADDRESS	3078 MARLO BLVD.	
CITY-ST-ZIP	CLEARWATER FL. 33759	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  **Kenneth Q. Von Heal** **8-5-04** **727-712-8343**

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

Attachment

54069691
P03000096360

**LOUIS SCOURTAS & ASSOCIATES
ACCOUNTANTS
24761 U.S. HWY 19 N SUITE 630
CLEARWATER, FLORIDA 33763
TEL: 727-443-0709 FAX: 727-449-9700**

April 20, 2004

FHA-Q2, Inc.
3078 Marlo Blvd
Clearwater, FL 33759

Dear Eric:

Please find enclosed your 2004 For Profit Corporation Annual Report Renewal.

You will need to sign and date this report as required at the bottom of the form.

Make your check payable to **DEPARTMENT OF STATE FOR \$150.00.**

Mail this report **NO** Later than **APRIL 30, 2004** to:

**DIVISION OF CORPORATIONS
PO BOX 6198
TALLAHASSEE, FL 32314**

Sincerely,


Louis Scourtas