

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 10, 2007
Secretary of State**

DOCUMENT# P06000066515

Entity Name: BJQ AND SNP CORP

Current Principal Place of Business:

2114 N FLAMINGO RD
#208
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

2114 N FLAMINGO RD
#208
PEMBROKE PINES, FL 33028 US

New Mailing Address:

1916 NW 137TH WAY

PEMBROKE PINES, FL 33028 US

FEI Number: 75-3239933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUAMINA, BARBARA
2114 N FLAMINGO RD
#208
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: QUAMINA, BARBARA
Address: 2114 N FLAMINGO RD #208
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: VP () Delete
Name: PARRIS, SHAMICA
Address: 1916 NW 137 WAY
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: VP (X) Delete
Name: MICHEL, JEAN-LUC MD
Address: 13104 SW 25 PLACE
City-St-Zip: DAVIE, FL 33325

Title: VP (X) Delete
Name: JEAN=BAPTISTE, KERINE
Address: 2251 GRAND AVE
City-St-Zip: FT MYERS, FL 33901

Title: VP (X) Delete
Name: GEORGE, LOUIS
Address: 2251 GRAND AVE
City-St-Zip: FT MYERS, FL 33901

Title: VP () Delete
Name: LOUIS, HAMELET
Address: 21411 NW 13 CT APT 506
City-St-Zip: MIAMI GARDENS, FL 333169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: QUAMINA, WAYNE JR
Address: 1916 NW 137TH WAY
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA QUAMINA

P

09/10/2007

Electronic Signature of Signing Officer or Director

_____ Date