

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000050856

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** LIQUE ENTERPRISES, CORP.

**Current Principal Place of Business:**

8370 SUMMER AVE.  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

8370 SUMMER AVE.  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 27-2955124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAMOS, JOSE S  
8370 SUMMER AVE.  
FORT MYERS, FL 33908 US

**Name and Address of New Registered Agent:**

WEAVER, MAGALI  
8370 SUMMER AVE.  
FORT MYERS, FL 33908 US

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: MAGALI WEAVER

03/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WEAVER, MAGALI  
Address: 8370 SUMMER AVE.  
City-St-Zip: FORT MYERS, FL 33908

I hereby 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 all other like empowered.

SIGNATURE: MAGALI WEAVER

PRES

03/22/2011

Electronic Signature of Signing Officer or Director

Date