2005 FOR PROFIT CORPORATION ANNUAL REPORT

05-02-2005 90451 010 *** 150.00 P93000083292

DOCUMENT # P93000083292 FILED 1. Entity Name Q & Q MART, INC. 05 MAY 16 AM 10: 23 SEGNL JARY OF STATE Principal Place of Business Mailing Address 2526 S MONROE STREET TALLAHASSEE, FLORIDA 2526 S MONROE STREET TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 CR2E034 (10/03) 04232005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3213582 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent RHO, SUNG H DO NOT WRITE 2526 S MONROE STREET TALLAHASSEE FL 32301 IN THIS SPACE 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 accopt the obligations of registered agent. SIGNATURE. Signature, igned or printed name of registered agent and trie if applicable [NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE RHO, SUNG H 348 MEADOW RIDGE DRIVE STREET ADDRESS TALLAHASSEE, FL 32312 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP IME NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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:

TITLE NAME STREET ADDRESS

NATURE AND TYPED OR PRINTED HAME OF BIGHING OFFICER OR DIRECTOR

4/20/05

Daytme Phone #