FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION ANNUAL REPORT



Florida Departmen^{ie.}

Sandra B. Morl

FILED

Apr 10 1997 8:00am

Secretary of State

Secretary of Sti DIVISION OF CORPO

1997

POCUMENT # P93000086989

BLUE QUEST, INC.

Principal Place of Business Mailing Address 142 N TWIN LAKES 142 N TWIN LAKES COCOA FL 32926-8731 **COCOA FL 32926** 3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1994 02/23/1996 4. FEI Number Applied For Principal Place of Business 2a. Mailing Address 59-3215973 Not Applicable 21 26 \$8.75 Additional Suite Apr. #, etc. Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 22 27 8. Election Campaign Financing \$5.00 May Be City & State City & State \Box Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032. Country Co 🗶 Yes 🗌 No Florida Statutes 29 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 142 N TWIN LAKES et Address (P.O. Box Number is Not Acceptable) COCOA FL 32926 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the ed corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida State. SIGNATURE (NO1E Register required when reinstating) Signature, typed or pented name of registered agent and title if applicable (96/6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13 ☐ Change Addition DELETE 1.11 THUE CR2E034 MITCHELL, SHARON E 1.2 f NA-Ai 142 N TWIN LAKES 1.3 iS STREET ADDRESS COCOA FL 32926 CCD - ST - ZIP Change ■ Addition DELETE 101.6 2.1 MITCHELL, MARK A NAME 221 142 N. TWIN LAKES 23 38 STREET ADDRESS **COCOA FL 32926** 011Y 51-76 Change Addition DELETE TITLE 3.1 NAME 32 3.3 ^{3S} STREET ADDRESS CHY-SI Addition Change DELETE 10.441 4 2 NAME STREET ADDRESS CITY ST-20 Change Addition DELETE 51 52 NAME 5.3 S STREET ADDRESS ☐ Change ☐ Addition DELETE THE 611 621 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an alterback with an address.

appears in Block 12 or Block 13 if changed, or on an attachment with an

SIGNATURE: