FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400007331 (9)

CQ ENTERPRISES, INC.

Principal Place of Business

FILED Apr 28 1997 8:00am Secretary of State



6770 SW 48 TI MIAMI FL 3315 US		6770 S.W. 48 TERRACE MIAMI FL 33155-5744		rr.	
				3. Date Incorporated or Qualified 01/28/1994	3a. Date of Last Report 05/01/1996
2. Principal P	ace of Business	2a. Mailing Address 33	77 (4. FEI Number	Applied For
21 23	33 SW 27 St	26 5 5	55 300 c)	54 65-0570803	Not Applicable
Suite, Apt 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	17m1 12	City & State 28 M/Am		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 73 3	133 Country USA	^{Zip} 33133	Country USA	8. This corporation has liability for Florida Statutes	ntangible tax under s. 199.032, Yes No
24]	9. Name and Address of Currer			10. Name and Address of New Re	
GAR	CIA, M. PAUL ESQ.		81 Name	Toca Qui tan	A
MAF	KOWITZ, DAVIS AND RINGEL, F		82 Street Add	ress (P.Q. Box Number is Not Acceptate	
) south dadeland blvd., su	ITE 1225		3333 SW 2	7 st
MIAI	VII FL 33156		83		
			84 City	MIBMI	FL 85 Zip Code 33/33
11. Pursuant	to the provisions of Sections 607.050	12 and 607, 1508, Florida Statutes	the above-named corp	poration submits this statement for the ption's board of directors. I hereby acception's	urpose of changing its registered
agent. La	ogistered agent, of both, in the state in familiar with, and accept the oblig	ations of Section 607.0506 Flori	ida Statutes.	mon's board or directors. Friereby accep	inte appointment as registered
SIGNATURE	abal	Munua	ra	Ψ,	118/1/
12.		ent and little if applicable (NOTE: D DIRECTORS	Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICE	SERS AND DIRECTORS IN 12
TILLE	PS DITIONS	DELETE	1.1 TITLE	ADDITIONO OF TAILORD	Change Addition
NAME	QUITANA, JOSE E	_	1.2 NAME		•
STREET ADDRESS	6770 S.W. 48 TERRACE		1.3 STREET ADDRESS		
CIEY-S*-ZIP	MIAMI FL 33155		1.4 CITY - ST - ZIP		
TITLE	VT	☐ DELETE	2.1 TITLE		Change Addition
-tman.	CID, JOSE L		2.2 NAME		
STREET ADDRESS	6770 S.W. 48 TERRACE MIAMI FL 33155		2.3 STREET ADDRESS		
C(1Y+S1+ZIP	MIAMI FL 33133	☐ DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE NAME		DULLIC	31 TITLE 32 NAME	•	CT Change CT Addition
S18EE1 ADDRESS			3.3 STREET ADDRESS	•	
011Y-\$1-7c*			3.4. CITY-ST-ZIP	•	
DILE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	I		4.3 STREET ADDRESS		
COY-ST-7IP			4.4 CITY-ST-ZIP		
TILLE		DELETE	51 TITLE		Change Addition
NAM!			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City - ST - ZP Title		DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME			6.2 NAME		En Grande En Rounion
street address			63 STREET ADDRESS		
CHY-St 20			6 4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, of changed, or an attachptent with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/97

SOTV6/2VIG