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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P94000032756 (6)

DOCUMENT # 1. Corporation Name SILVER Q, INC.

FILED May 12 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			t inntibut tin inti niett antel antel antel antel antel antel atel italia italia fanti atelia delli antel		
	NIVERSITY AVENUE	225 WEST UNIVERSITY	AVENUE				
GAINESVILLE FL 32601		GAINESVILLE FL 32001	-17 -110-				
					DO NOT WRITE IN THIS S	PACE	
					3. Date Incorporated or Qualified		
A Britanian I D	n	The Market Addition			04/29/1994 4. FEI Number	т т.	
<u> </u>	'lace of Business	2a. Mailing Address			1	-	plied For
21 Cuite Ant	# Ato	Suite, Apt. #, etc.			59-3240758		t Applicable
Suite, Apt.	#, 6 (C.	27			5. Certificate of Status Desired	\$8.75 / Fee Re	
City & Stat	Θ	City & State			C Fleation Compaign Financing		```
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cor	untry	8. This corporation owes or has paid the curre		
24	25	29	30	•	- 1 · · · · · · · · · · · · · · · · · ·] No
24	9. Name and Address of Curren		1001	1	10. Name and Address of New Registered A		<u> </u>
CII	NQUE, JOSEPH C			81 Name	LIVIAA. CIJONE		
	1 W UNIVERSITY AVE				INIAN CINQUE		
	UNESVILLE FL 32601			Street Add	dress (P.O. Box Number is Not Acceptable)		
G/A	NINES VICLE PL 32001			83	70.00 31 02.102		
				84 City	FSMLLE FL	85 Zip	Code 601
44 0	1- 10	0 and 607 15 00. Florida Ctal	dee the e	GAIN	YESVILLE FL reporation submits this statement for the purpose of a		
office or r	registered agent, or both, in the State	of Florida, Such change was	authorize	ed by the corpora	altion's board of directors. I hereby accept the appo	sintment as	registered
agent. La	im familiar with, and accept the obliga	ations of, Section 607.0505, I	Horida Sta	ilules.		40	
SIGNATURE	Vivian Cinque	·			4-Z8-	960	
40	Signature, typed or princed name of registrated age OFFICERS ANI		011 : Reg store	ed Agent signature requ	DATE ADDITIONS/CHANGES TO OFFICERS AND		S INI 12
12.	PSD OF THE MAIN	DELETE	1.1 7	ITLE	PS D	Change	Addition
	CINQUE, JOSEPH C	No other to			VIVIAN CINQUE		4
NAME	2635 S.W. 35TH PLACE, NO.	107			630 N.W 51 DRIVE		
STREET ADDRESS		107		TREET ADDRESS	AINESVILLE FL 32601		
CITY-ST-ZIP	GAINESVILLE FL 32601	DELETE			SAINCES VICE 1 L GEORI	Change	Addition
TITLE			2.1 T			☐ Critarige	Addition
NAME			2.2 N	1	•		
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TITLE		☐ DELETE	4.1 7	ITLE	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			4.2	NAME			
STREET ADDRESS			430	TREET ADDRESS			
CITY-ST-ZIP			7.00				
				CITY-ST-ZIP			
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NAME Street Address		DELETE	4.4 C 5.1 T 5.2 M 5.3 S	OTY-ST-ZIP ITLE IAME STREET ADDRESS		Change	Addition
NAME Street address City-St-Zip			4.4 C 5.1 T 5.2 N 5.3 S 5.4 C	OTTY-ST-ZIP OTTEE IAME STREET ADDRESS OTTY-ST-ZIP		Change Change	Addition
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14. I 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 trusted 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, or on an attachment with an address