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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

May 06 1997 8:00am

Secretary of State

DOCUMENT # P96000044351 (0)

GLOBAL QUEST, INC.

CITY-ST-ZIP

Principal Place	of Business	Mailing Address) MAIIL B(Bit DIOON IILT) BILDI IIDI 1001
1900 B. HARBOR CITY BLVD. BUITE \$45 MELBOURNE FL 32801		1900 S. HARBOR CITY BLV SUITE 345 MELBOURNE FL 32901-4783	-		
				3. Date Incorporated or Qualified 05/15/1996	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FLI Number	Applied For
21 1901	Highway AIA	26 1901 High	WALK LACE	59-3384592	Not Applicable
Suite, Apt. #	t, etc.	Suito, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 Suite		27 Suite 4-B		9. Confidence of Status Desired	Fee Required
	N HARDOUR, FI	City & State 28 TudiAU HAS	zbouz Bch, Fl	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 3293		29 32937	Country 30 Brevand US	8. This corporation has liability for Florida Statutes	∐Yes 💢 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	R, CHRISTOPHER A		81 Name	INDISTROHER IA L	-LAGEP
1900 S. HARBOR CITY BLVD. 82 Street Address				ess (P.O. Box Number is Not Acceptat	ple)
SUITE			1901	Highway AIA	
MELB	OURNE FL 32901		83 < 574	0 U-R	
			84 City		85 Zip Code
44 6.55.55.4	10 0 00 01 00		コング・4	IN HARbour Beach	- FL 32937
Office of re	i gisteren age nt, or both, in the Stale o	Hilorida, Such change was a	authorized by the corograf	poration submits this statement for the prior is board of directors. I hereby acce	ourpose of changing its registered to the appointment as registered
agent I an	n familiar with, and accept the obligati	ons of, Section 607.0505, Flo	orida Statutes.	, , , , , , , , , , , , , , , , , , , ,	a the appearance in do registered
SIGNATURE	Nacional Property and State St	Augusta et aleman et la seudi			
12.	Signature, typed or printed name of registered agent OFFICERS AND		Fit gistered Ager I signature require 13.	od when reinstating) ADDITIONS/CHANGES TO OFFIC	PEDS AND ENDEOLOGO IN 12
	D	DELETE	1.1 TITLE	ADDITIONS/OFFANGES TO OFFIC	Change Addition
20 m g - 2	HAGER, CHRISTOPHER A		1.2 NAME		
	710 ROBIN WAY SOUTH		1.3 STREET ADDRESS		
	SATELLITE BEACH FL 32937		1.4 CH1Y - ST - 7/P		
THE SE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - \$1 - ZIP		
TITLE		DELETE	3.1 TO LE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-S1-7IP		
TITLE		TT DETELL	4.1 THE		Change Addition
NAME			4 2 NAME		İ
STREET ADDRESS			4.3 STREET ADDRESS -		
CITY-ST-ZIP		The second	4 4 CITY - ST - 7-F	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DETE1€	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Drive	5.4 CHY-S1-70°		
TITLE		DELETE	6.1 1111.0		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		

6.4 C(1Y - S1 - 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 Statules. 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 eath; 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 flock 13 if changed, or on an attachment with an address.