

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 01 1997 8:00am  
Secretary of State

DOCUMENT # P96000045719 (7)

1. Corporation Name  
AGENCY QUE INC.



Principal Place of Business  
2320 SOUTHWEST 31ST AVENUE  
MIAMI FL 33145

Mailing Address  
2320 SOUTHWEST 31ST AVENUE  
MIAMI FL 33145-3102

2. Principal Place of Business

21 1607 Ponce de Leon Blvd.  
Suite, Apt. #, etc.

22 City & State  
23 Coral Gables, FL

24 Zip 33134-4011 25 Country U.S.A.

2a. Mailing Address

26 1607 Ponce de Leon Blvd.  
Suite, Apt. #, etc.

27 City & State  
28 Coral Gables, FL

29 Zip 33134-4011 30 Country U.S.A.

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified  
05/30/1996

3a. Date of Last Report

4. FLI Number  
65-0678045

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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 by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME SCOTT, TIMOTHY D  
STREET ADDRESS 2320 SOUTHWEST 31ST AVENUE  
CITY-ST-ZIP MIAMI FL 33145

TITLE D  
NAME DAVIS, TIMOTHY K  
STREET ADDRESS 18352 NW 68TH AVENUE APT. D  
CITY-ST-ZIP MIAMI FL 33015

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE C/D  
1.2 NAME Scott, Timothy D.  
1.3 STREET ADDRESS 18352 NW 68th Avenue Apt D  
1.4 CITY-ST-ZIP Miami, FL 33015

2.1 TITLE P/D  
2.2 NAME Davis, Timothy K.  
2.3 STREET ADDRESS 18352 NW 68th Avenue Apt D  
2.4 CITY-ST-ZIP Miami, FL 33015

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS

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, or on an attachment with an address.

SIGNATURE: Timothy K. Davis - President 4/25/97 305-442-2783

CR2E034 (9/96)