


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2007 8:00 am
Secretary of State

06-20-2007 90001 040 ***150.00

DOCUMENT # P97000088772	
1. Entity Name SRQ ENTERPRISES, INC.	

Principal Place of Business 2700 S TAMIAMI TRAIL SUITE 2 SARASOTA, FL 34239	Mailing Address POST OFFICE BOX 15154 SARASOTA, FL 34277-5154
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06052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0793231	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALD, SHELDON G.
 2700 S TAMIAMI TRAIL
 STE #2
 SARASOTA, FL 34239

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

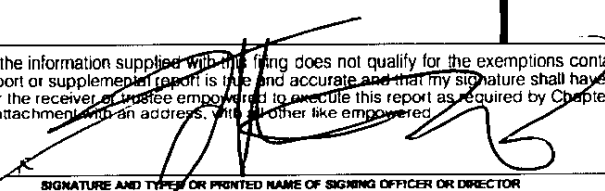
**FILE NOW!!! FEE IS \$150.00
 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE SECRETARY	SECRETARY
NAME	WIENER, STANLEY M MD
STREET ADDRESS	2700 S TAMIAMI TRAIL, STE 2
CITY-ST-ZIP	SARASOTA, FL 34239
TITLE	S P D
NAME	WALD, SHELDON G
STREET ADDRESS	2700 S TAMIAMI TRAIL, STE 2
CITY-ST-ZIP	SARASOTA, FL 34239
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **6/11/07 941 3661122**

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #