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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000096289 (8)

M P QUINN ENTERPRISES INC.

FILED Jun 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				Liabian us saul saul saul saul saul saul saul s	
7382 NW 45 AVE COCONUT CREEK FL 33073		7382 NW 45 AVE COCONUT CREEK	FL 33073	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 11/10/1997	
	lace of Business	2a. Maiting Address		4. FEI Number 65 0803966	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27]		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	- Z(ρ : - 1	Country	8. This corporation owes or has paid the o	urrent year Intangible
24	25 S. Name and Address of Cu	[29]	30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	
<u> </u>		Tront Hogistorou Agont	81 Name		
QUINN, JAMES C 7382 NW 45 AVE			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	OCONUT CREEK FL 33073			ddiess (r.O. Box Number is Not Acceptable)	
			83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida SI	tatutes, the above-named o	corporation submits this statement for the purpose	of changing its registered
 office or r 	egistered agent, or both, in the S m familiar with, and accept the o	itale of Horida. Such change w	vas authorized by the corpi	oration's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE	in parimer view, the envelope inc.	arigitation of electronic correspond	, remainded		
	Signature, typed or printed harocial register	<u></u>	(NOTE Registered Agent signature)		ID DIDECTORS IN 40
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND P/7/5/0	Change Addition
TITLE NAME	P15/0	בן ותוכוב	1.2 NAME	TAMES C. QUINN	
STREET ADDRESS			1.3 STREET ADDRESS	TAMES C. QUINN 1382 NW 45-th AVE, Coconut Creek, FL 33	
CITY-ST-ZIP			1.4 CITY - S1 - ZIP	COCONUT CREEK, FL 33	073
TITLE		DELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADURESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY - ST - ZIP		Change Addition
TITLE		[] DELETE	1		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4. CITY-ST-7(P		
CITY-ST-ZIP TITLE		DELETE			Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City-St-7IP		De. Et.	5.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELET e	I		T change T working
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information sucroli	ed with this filing does not qua	64 CITY-ST-ZIP lify for the exemption state	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information

rnereby certify that the information supplied with this tilling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or supplemental arrural 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 corporated 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.