

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000011950

1. Corporation Name
Q MART INC.

Principal Place of Business
4737 BERWYN COURT
PALM HARBOR FL 34685

Mailing Address
4737 BERWYN COURT
PALM HARBOR FL 34685

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90039 039 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/03/1998

4. FEI Number
59-349 33 45

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 owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business
21 Q MART INC
Suite, Apt. #, etc.

2a. Mailing Address
26 Q MART INC
Suite, Apt. #, etc.

22 3414 EASTLAKE ROAD
City & State

27 3414 EASTLAKE ROAD
City & State

23 PALM HARBOR FL
Zip Country

28 PALM HARBOR FL
Zip Country

24 34685 25

29 34685 30

9. Name and Address of Current Registered Agent

QUIRI, ROBERT H
4737 BERWYN COURT
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name ROBERT H QUIRI
82 Street Address (P.O. Box Number is Not Acceptable)
3414 EASTLAKE ROAD
83
84 City PALM HARBOR FL 85 Zip Code 34685

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME QUIRI, ROBERT H
STREET ADDRESS 4737 BERWYN COURT
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE ☐ DELETE
NAME QUIRI, PATTY
STREET ADDRESS 4737 BERWYN COURT
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE ☐ DELETE
NAME MARTIN, JOHN
STREET ADDRESS 1307 FOREST EDGE BLVD.
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☐ DELETE
NAME MARTIN, JAN
STREET ADDRESS 1307 FOREST EDGE BLVD.
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: Robert H Quiri Robert H Quiri 1/7/99 727-785-5613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)