

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

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90152 047 ***158.75

DOCUMENT # P98000030530

1. Corporation Name
QB INVESTMENTS, INC.

Principal Place of Business

2665 S BAYSHORE DRIVE
STE 703
MIAMI FL 33133

Mailing Address

2665 S BAYSHORE DRIVE
STE 703
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1998

4. FEI Number

☒ 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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 210 174th Street

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.
Apt. 312

27 Suite, Apt. #, etc.

23 City & State
N. Miami, Florida

28 City & State

24 Zip 33133 Country

29 Zip Country 30

9. Name and Address of Current Registered Agent

RICHARDS, TIMOTHY D ESQ
2665 S BAYSHORE DRIVE
STE 703
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name World Corporate Services, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
2665 South Bayshore Drive
83 Suite 703
84 City Miami, Florida FL 85 Zip Code 33133

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

Timothy D. Richards

Timothy D. Richards, President, 01/13/99

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
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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 DP ☐ Change ☒ Addition

1.2 NAME Jose Quizena Lega
1.3 STREET ADDRESS 210 174th Street, Apt. 312
1.4 CITY-ST-ZIP Miami, Florida 33166

2.1 TITLE DVP ☐ Change ☒ Addition

2.2 NAME Marleny Bazarro de Quizena
2.3 STREET ADDRESS 210 174th Street, Apt. 312
2.4 CITY-ST-ZIP North Miami, Florida 33160

3.1 TITLE S ☐ Change ☒ Addition

3.2 NAME Jose Quizena Leon
3.3 STREET ADDRESS 6175 NW 167th Street, STE G-21
3.4 CITY-ST-ZIP Miami, Florida 33015

4.1 TITLE AS ☐ Change ☒ Addition

4.2 NAME Timothy D. Richards, Esq.
4.3 STREET ADDRESS 2665 South Bayshore Dr., STE703
4.4 CITY-ST-ZIP Miami, Florida 33133

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:

Timothy D. Richards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0194362