

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000049290

1. Entity Name
T Q MANUFACTURING CORPORATION



Principal Place of Business
**2156 - 10TH ST.
SARASOTA, FL 34237**

Mailing Address
**2156 - 10TH ST.
SARASOTA, FL 34237**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0925606	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**KAUFFMAN, K. SCOTT
2156 - 10TH ST.
SARASOTA, FL 34237**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

U000000304450

02/05/08 000000 000 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KAUFFMAN, K. SCOTT 1645 FOX CREEK DR SARASOTA, FL 34240
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SHUE, RICHARD 2546 RIVER RIDGE DR SARASOTA, FL 34239
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SHUE, LARRY 7030 RICHARDSON DR SARASOTA, FL 34240
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SHUE, MIKE 7115 INDIAN BOW LN SARASOTA, FL 34240
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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: K. Scott Kauffman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/28/08

Date

941-366-9651

Daytime Phone #