FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 26 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S41856** **(3)**

1. Corporation Name
BIG Q RESTAURANT, INC.

Principal Place of Business
675 NW 5TH STREET
MIAMI FL 33128

Mailing Address
675 NW 5TH STREET
MIAMI FL 33128

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/29/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 1036 S.W. 1 ST.
Suite, Apt. #, etc.
22
City & State
23 MIAMI FLA.
Zip
24 33130
Country
25 US

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 65-0250171 — 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
FLORIDA ANNUAL REPORT SERVICES/CANTERA & ASSOCIATES, INC.
1036 S.W. 1ST ST.
MIAMI FL 33130

10. Name and Address of New Registered Agent
81 Name: FLORIDA ANNUAL REPORT SERVICES INC.
82 Street Address (P.O. Box Number is Not Acceptable): 1036 S.W. 1 ST.
83
84 City: MIAMI FL 85 Zip Code: 33130

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: AMADA C.LOPEZ.PRES — DATE: 4/25/95
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 TITLE	☐ Change ☐ Addition
NAME	QUINTERO, HENRY	2 NAME	800001468468
STREET ADDRESS	2419 SW 24TH TERRACE	3 STREET ADDRESS	-04/28/95--01039--015
CITY-ST-ZIP	MIAMI FL	4 CITY-ST-ZIP	****200.00 ****200.00
TITLE	SD	1 TITLE	☐ Change ☐ Addition
NAME	QUINTERO, GLORIA	2 NAME	
STREET ADDRESS	2419 SW 24TH TERRACE	3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4 CITY-ST-ZIP	
TITLE		1 TITLE	☐ Change ☐ Addition
NAME		2 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		1 TITLE	☐ Change ☐ Addition
NAME		2 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		1 TITLE	☐ Change ☐ Addition
NAME		2 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		1 TITLE	☐ Change ☐ Addition
NAME		2 NAME	JM 4/26
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 is not shown above with an address.

SIGNATURE: Pres. — 4/25/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
HENRY QUINTERO

0206870 CP