

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84859

FILED
Apr 30, 2007
Secretary of State

Entity Name: QUE-CAN ENTERPRISES, INC.

Current Principal Place of Business:

7800 W OAKLAND PARK BLVD
BLDG "G"
SUNRISE, FL 33351

New Principal Place of Business:

7800 W OAKLAND PARK BLVD
BLDG
SUNRISE, FL 33351

Current Mailing Address:

7800 W OAKLAND PARK BLVD
BLDG "G"
SUNRISE, FL 33351

New Mailing Address:

7800 W OAKLAND PARK BLVD
BLDG
SUNRISE, FL 33351

FEI Number: 65-0293990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPIERRE, REJEAN
7800 W OAKLAND PARK BLVD
BLDG "G"
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

LAPIERRE, REJEAN
7800 W OAKLAND PARK BLVD
BLDG
SUNRISE, FL 33351 US

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.

SIGNATURE:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: LECLAIR, LOUIS-MARIE
Address: 7800 W OAKLAND PARK BLVD
City-St-Zip: SUNRISE, FL

Title: S () Delete
Name: LECLAIR, LOUIS-MARIE
Address: 7800 W OAKLAND PARK BLVD
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS MARIE LECLAIR

DPT

04/30/2007

Electronic Signature of Signing Officer or Director

Date