Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90122 033 ***150.00

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V14451

1. Corporation QUICK-C	HECK, INC.			
Principal Place	of Business	Mailing Address		
700 E BURGESS	S RD	PO BOX 15252		
C103	22204	PENSACOLA FL 32514		DO NOT WRITE IN THIS SPACE
PENSACOLA FL US	32504	US		3. Date Incorporated or Qualifed
				02/17/1992
2. Principal P	lace of Business	2a. Mailing Address_		4. FEI Number Applied For
21 1200	14 m 22. 187 c	26 1200 Blus	14 m23	59-3106254 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required Fee Required
City & Stat	θ ~ ,	City & State	<u> </u>	6. Election Campaign Financing \$5.00 May Be
23 78	Sacoby I-C	28 FENSOLOD	+0	Trust Fund Contribution Added to Fees
Zip	Country	Zip C // I	Country	8. This corporation owes the current year Intangible
24] SƏS	14 25 USA	29 5-5 14 30	J WSIT	Personal Property Tax.
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
ELIASON, JAMES 1321 E OLIVE RD PENSACOLA FL 32514				Address (P.O. Box Number is Not Acceptable)
			84 City	ENSOLO/a FL 85 ZID COOL 14
l office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth ons of, Section 607.0505, Florida	nonzed by the corbo	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	Change Addition
NAME	ELIASON, TRISHA			EHZITT ROZEITS
STREET ADDRESS	700 E BURGESS RD C103		1.3 STREET ADDRESS	1200 Bluefox71
	PENSACOLA FL 32504		1.4 CITY-ST-ZIP	Pensacola FC 32514
CITY-ST-ZIP	VP	☐ DELETE	2.1 TITLE	Addition
	ELIASON, JAMES		2.2 NAME	23ms James
NAME	700 E BURGESS RD C 103		2.3 STREET ADDRESS	1200 Bluefox P)
STREET ADDRESS	PENSACOLA FL 32504		2.4 CITY-ST-ZIP	PENSACON FL 32514
TITLE	TENOAGOETTE GEGOT	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		_	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
			3.4. CITY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITE TITE		□ DELETE	6.1 TITLE	☐ Change ☐ Addition

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 of the rejetiver 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 atjachment with an enderess, with all other like empowered.

6.2 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE