

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V53703 (7)
1. Corporation Name
QUINTA ENTERPRISES, INC.



Principal Place of Business
82 SOUTHSIDE DR
CRAWFORDVILLE FL 32327
US

Mailing Address
82 SOUTHSIDE DR
CRAWFORDVILLE FL 32327-4655
US

3. Date Incorporated or Qualified 07/24/1992	3a. Date of Last Report 05/14/1996
4. FEI Number 59-3141923	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 4415 Piedmont Rd Suite, Apt. #, etc. 22 City & State Pensacola, FL 23 Zip 32503 24 Country US	2a. Mailing Address 26 4415 Piedmont Rd Suite, Apt. #, etc. 27 City & State Pensacola, FL 28 Zip 32503 29 Country US
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9. Name and Address of Current Registered Agent

QUINTA, JOHN G
82 SOUTHSIDE DR
RT 2 BOX 4330-20
CRAWFORDVILLE FL 32327

10. Name and Address of New Registered Agent

81 Name Quinta, John G	82 Street Address (R.O. Box Number is Not Acceptable) 4415 PIEDMONT RD	83	84 City PENSACOLA	85 Zip Code FL 32503
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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 *[Signature]* 4/22/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	DELETE <input type="checkbox"/>	11 TITLE D	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME QUINTA, JOHN G		12 NAME QUINTA, JOHN G.	
STREET ADDRESS 82 SOUTHSIDE DR		13 STREET ADDRESS 4415 PIEDMONT RD	
CITY-ST-ZIP CRAWFORDVILLE FL		14 CITY-ST-ZIP PENSACOLA FL 32503	
TITLE D	DELETE <input type="checkbox"/>	21 TITLE D	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME QUINTA, JUDY S		22 NAME QUINTA, JUDY S	
STREET ADDRESS 82 SOUTHSIDE DR		23 STREET ADDRESS 4415 PIEDMONT RD	
CITY-ST-ZIP CRAWFORDVILLE FL		24 CITY-ST-ZIP PENSACOLA FL 32503	
TITLE	DELETE <input type="checkbox"/>	31 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	41 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	51 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	61 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *[Signature]* 4/22/97 804 470 0369

CR2E034 (9/96)