

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 30, 2006 8:00 am
Secretary of State**

01-30-2006 90038 022 ****61.25

DOCUMENT # F0300006207

1. Entity Name
CONQUEST NA, INC.



Principal Place of Business
590 COLUMBUS AVENUE
THORNWOOD, NY 10594

Mailing Address
590 COLUMBUS AVENUE
THORNWOOD, NY 10594

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
52-2133182

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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

**Filing Fee Is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PCD
NAME REILLY, SCOTT
STREET ADDRESS 2595 SPALDING DRIVE
CITY-ST-ZIP ATLANTA, GA 30350

Delete

TITLE P/D
NAME Emilio Diaz-Torre
STREET ADDRESS 7235 Northgreen Drive NE
CITY-ST-ZIP Atlanta, GA 30328

Change

Addition

TITLE VD
NAME DIAZ-TORRE, EMILIO
STREET ADDRESS 582 COLUMBUS AVENUE
CITY-ST-ZIP THORNWOOD, NY 10594

Delete

TITLE V/D
NAME Paul Moreau
STREET ADDRESS 2595 Spalding Drive
CITY-ST-ZIP Atlanta, GA 30350

Change

Addition

TITLE STD
NAME ORTEGA, JOSE F
STREET ADDRESS 582 COLUMBUS AVE.
CITY-ST-ZIP THORNWOOD, NY 10594

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE D
NAME SLINEY, MICHAEL
STREET ADDRESS 10211 NORTON RD
CITY-ST-ZIP POTOMAC, MD 20854

Delete

TITLE D
NAME Patrick Murphy
STREET ADDRESS 2595 Spalding Drive
CITY-ST-ZIP Atlanta, GA 30350

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/2006
Date

(941)773-3688
Daytime Phone #