2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000003656

Entity Name: QUIQ, INC.

FILED Dec 02, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2901 W. CYPRESS CREEK BLVD. FORT LAUDERDALE, FL 33309				2901 W. CYPRESS CREEK BLVD. SUITE 117 FORT LAUDERDALE, FL 33309		
Current Mailing Address:				New Mailing Address:		
460 NORRISTOWN RD., STE. 202 BLUE BELL, PA 19422						
FEI Number: 26-1953787 FEI Number Applied For () FEI Number			nber Not Applicable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ANN J. WILLIAMS						
Electronic Signature of Registered Agent Date						
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C () E BLYSKAL, ROBE 7000 ISLAND BL' AVENTURA, FL	VD., APT. 1804		Title: Name: Address: City-St-Zip:	C (X WITOSHKIN, V 351 COVERED NEW HOPE, P	BRIDGE RD
Title: Name: Address: City-St-Zip:	DST () E FRANKEL, MARK 107 BEAUMONT LOWER GWYNE	PLACE		Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	DP () E STEIN, MEL 250 MCCLURE D BLUE BELL, PA			Title: Name: Address: City-St-Zip:	DP (X SOMMER, PHI 2108 WILLOW WILMINGTON,	/ WAY
Title: Name: Address: City-St-Zip:	D () E WITOSHKIN, WA 351 COVERED B NEW HOPE, PA	RIDGE RD.		Title: Name: Address: City-St-Zip:	BLYSKAL, RO	BLVD APT 1804
Title: Name: Address: City-St-Zip:	D () E JUDD, JIM 911 LABURNUM WYNCOTE, PA			Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	D () E KESSEL, LARRY 4114 HAIN DR. LAFAYETTE HILL			Title: Name: Address: City-St-Zip:	() Change ()Addition

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: PHILIP C. SOMMER DP 12/02/2009