

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005124

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: QUARTX FLEET MANAGEMENT, INC.

## Current Principal Place of Business:

300 CENTRE POINTE DRIVE  
VIRGINIA BEACH, VA 23462

## New Principal Place of Business:

## Current Mailing Address:

6 SYLVAN WAY  
PARSIPPANY, NY 07054

## New Mailing Address:

FEI Number: 51-0351151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FIGUEROA, ORLANDO  
Address: 48 WALL STREET  
City-St-Zip: NEW YORK, NY 10005

Title: VP ( ) Delete  
Name: WYSHNER, DAVID B  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: D ( ) Delete  
Name: NELSON, RONALD L  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: D ( ) Delete  
Name: WYSHNER, DAVID B  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: T ( ) Delete  
Name: WYSHNER, DAVID B  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVPD (X) Change ( ) Addition  
Name: WYSHNER, DAVID B  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

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

Title: SVP (X) Change ( ) Addition  
Name: BLASKEY, DAVID D  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: VP (X) Change ( ) Addition  
Name: SOLOMON, ANDREW  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: AS ( ) Change (X) Addition  
Name: GALLAGHER, PAUL  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

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: PAUL GALLAGHER

AS

04/25/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date