2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 17, 2006 08:00 AM DOCUMENT # F96000001994 **Secretary of State** QUANTUM CONSTRUCTION COMPANY Principal Place of Business Mailing Address 401 LOCUST ST 401 LOCUST ST CORAPOLIS, PA 15108 CORAPOLIS, PA 15108 No Chg-P 01062006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 25-1784521 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 3. 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, typed or printed name of recistered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SCHMITT, GEORGE J JR. STREET ADDRESS 125 HELDON DR. U00000389857 CITY-ST-ZIP CORAOPOLIS, PA 15108 01/23/06-80002-005 150.nn TITLE NAME HARROD, CLARENCE O STREET ADDRESS 188 COUNTY RD CITY-ST-702 WINFIELD, AL 35594 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if champed, or on an attachment with an address, with all other like empowered.

DITY-ST-ZIP

SIGNATURE: _	Come Schutt (Grovac	I	Schnitt	1/10	06	412-269-6501
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	Daytime Phone #