2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

s report or supplement

SIGNATURE AND TYPED OR PRINTED NAME OF

Feb 06, 2008 8:00 am Secretary of State DOCUMENT # L40814 1. Entity Name 02-06-2008 90021 005 ***150.00 QUEBEC FLORIDA INVESTMENT, INC. Principal Place of Business Mailing Address 212 W LAKE DR 212 W LAKE DR PEMBROKE PARK FL 33009 PEMBROKE PARK FL 33009 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 65-0162672 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GILLES, QUINTIN 212 W LAKE DR Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PARK FL 33009 Zip Code FI 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, typod or printed name of registered opent and trie if emplicable. (NOTE: Fegistered Agent eignature required when reinstating DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PD ☐ Defete TITLE Change Addition QUINTIN, GILLES NAME NAME STREET ADDRESS 212 W LAKE DR STREET ADDRESS CITY-ST-7IP PEMBROKE PARK FL 33009 CITY-ST-ZiP Derete TITLE ACT TITLE ☐ Change Addition NAME QUINTIN, CAROLINE HAME 212 W LAKE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PARK FL 33009 CITY-ST-70 TITLE Delete TITLE Change Addition NAME QUINTIN, CHENTAL STREET ADDRESS 212 W LAKE DR STREET ADORESS CITY-ST-ZIP PEMBROKE PARK FL 33009 CITY-ST-7/P ☐ Defete TOTALE TITLE Change Addition QUINTIN, LUCILLE D NAME NAME 212 W LAKE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PARK FL 33009 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delate ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS SITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplies with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

our report is true and accorate and that my signature shall have the same legal effect as if made under oath; that I am an efficer or director yustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11

FILED