

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2007 8:00 am**  
**Secretary of State**

01-31-2007 90039 010 \*\*\*150.00

<b>DOCUMENT # M27813</b> 1. Entity Name <b>QUEBEC REALTY CORP.</b>																													
Principal Place of Business <b>1500 N OCEAN BLVD</b> <b>602</b> <b>POMPANO BEACH, FL 33062 US</b>			Mailing Address <b>1500 N OCEAN BLVD</b> <b>602</b> <b>POMPANO BEACH, FL 33062 US</b>																										
2. Principal Place of Business - No P.O. Box # <b>3205 MARINE DR.</b> Suite, Apt. #, etc.		3. Mailing Address <b>3631 W. COMMERCIAL BLVD</b> Suite, Apt. #, etc.		<b>40007167</b> 																									
City & State <b>POMPANO BCH. FL.</b>		City & State <b>FT. LAUDERDALE FL</b>		01292007 Chg-P CR2E034 (12/06)																									
Zip <b>33062</b>		Country <b>US</b>		4. FEI Number <b>65-0154910</b>																									
Zip <b>33309</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>WOODSTOCK, DENISE</b> <b>1500 N. OCEAN BLVD.</b> <b>602</b> <b>POMPANO BEACH, FL 33062</b>				7. Name and Address of New Registered Agent Name <b>WOODSTOCK DENISE</b> Street Address (P.O. Box Number is Not Acceptable) <b>3631 W. COMMERCIAL BLVD. #7</b> City <b>FORT LAUDERDALE FL</b> Zip Code <b>33309</b>																									
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 <b>DENISE WOODSTOCK</b> <i>Denise Woodstock</i> <b>1/29/07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;">P</td> <td style="width:30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td><b>WOODSTOCK, DENISE</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>1500 N OCEAN BLVD. #602</b></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td><b>POMPANO BCH, FL 33062</b></td> <td></td> </tr> </table>			TITLE	P	<input type="checkbox"/> Delete	NAME	<b>WOODSTOCK, DENISE</b>		STREET ADDRESS	<b>1500 N OCEAN BLVD. #602</b>		CITY-ST-ZIP	<b>POMPANO BCH, FL 33062</b>		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;">P.</td> <td style="width:30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td><b>WOODSTOCK DENISE</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>3631 W. COMMERCIAL BLVD. #7</b></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td><b>FT. LAUD. FL 33309</b></td> <td></td> </tr> </table>			TITLE	P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	<b>WOODSTOCK DENISE</b>		STREET ADDRESS	<b>3631 W. COMMERCIAL BLVD. #7</b>		CITY-ST-ZIP	<b>FT. LAUD. FL 33309</b>	
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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 607, 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:** *Denise Woodstock* **1/29/07** **954-1782-3303**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #