

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90193 032 ***150.00

DOCUMENT # P00000031612 1. Entity Name QUANTUM CONSULTING SOLUTIONS, INC.			
Principal Place of Business 13010 SW 104TH AVENUE MIAMI, FL 33176		Mailing Address 13010 SW 104TH AVENUE MIAMI, FL 33176	
2. Principal Place of Business 785 Crandon Blvd. Suite, Apt. #, etc. # 505		3. Mailing Address 785 Crandon Blvd. Suite, Apt. #, etc. # 505	
City & State Key Biscayne, FL		City & State Key Biscayne, FL	
Zip 33149		Zip 33149	
Country USA		Country USA	
4. FEI Number 65-0993823		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUERRA, MELBA 13010 SW 104TH AVENUE MIAMI, FL 33176		7. Name and Address of New Registered Agent Name same Street Address (P.O. Box Number is Not Acceptable) 785 Crandon Blvd. City Key Biscayne FL Zip Code 33149	
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 <u><i>Melba Guerra</i></u> DATE 4/25/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUERRA, MELBA 13010 SW 104 AVENUE MIAMI, FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	785 Crandon Blvd., # 505 Key Biscayne, FL 33149 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GUERRA, NICOLE 13010 SW 104 AVENUE MIAMI, FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	785 Crandon Blvd., # 505 Key Biscayne, FL 33149 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Melba Guerra</i></u>		Date 4/25/05 (305) 525-3660	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	