

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2004 8:00 am
Secretary of State

05-04-2004 90203 046 ***150.00

DOCUMENT # P00000099145 ✓ 1. Entity Name QUALITY HEALTH CONSULTANT INC.																			
Principal Place of Business 14313 S.W. 45 TERR MIAMI, FL 33175				Mailing Address 14313 S.W. 45 TERR 5751 SW 54th COURT DAVIE, FL 33314															
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		 03262004 Chg-P CR2E034 (10/03)															
4. FEI Number 65-1048906				Applied For ☐ Not Applicable															
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent ZAPATA, NORHA 14313 S.W. 45 TERRACE MIAMI, FL 33175															
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution? ☐ \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">PD</td> </tr> <tr> <td>NAME</td> <td>ZAPATA, NORHA</td> </tr> <tr> <td>STREET ADDRESS</td> <td>14313 S.W. 45 TERRACE</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>MIAMI, FL 33175</td> </tr> </table>			TITLE	PD	NAME	ZAPATA, NORHA	STREET ADDRESS	14313 S.W. 45 TERRACE	CITY - ST - ZIP	MIAMI, FL 33175	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: 70%;">NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS		CITY - ST - ZIP	
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* New Address : 5751 SW 54th court
Davie, FL 33314