

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062664

FILED
Apr 12, 2007
Secretary of State

Entity Name: QUADRIQUE CORPORATION

Current Principal Place of Business:

4972 GARDEN DRIVE
DELRAY BEACH, FL 33445

New Principal Place of Business:

160 CONGRESS PARK DRIVE
SUITE 201
DELRAY BEACH, FL 33445

Current Mailing Address:

4972 GARDEN DRIVE
DELRAY BEACH, FL 33445

New Mailing Address:

160 CONGRESS PARK DRIVE
SUITE 201
DELRAY BEACH, FL 33445

FEI Number: 65-1116775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERE, SYLVIA C P
4972 GARDEN DRIVE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: RIVERE, SYLVIA
Address: 4972 GARDEN DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: PSTD () Delete
Name: RIVERE, HERVE
Address: 4972 GARDEN DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERVE RIVERE

PSTD

04/12/2007

Electronic Signature of Signing Officer or Director

Date