

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000087642

Entity Name: QUANTUM FOODS, INC.

FILED
Oct 05, 2005
Secretary of State

Current Principal Place of Business:

6715 FAIRWAY COVE
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

6715 FAIRWAY COVE
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 59-3745916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTAMI, ROCCO
6715 FAIRWAY COVE
ORLANDO, FL 32835 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: ROCCO POTAMI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POTAMI, ROCCO MR
Address: 6715 FAIRWAY COVE
City-St-Zip: ORLANDO, FL 32835

Title: S () Delete
Name: POTAMI, MARY BETH MRS
Address: 6715 FAIRWAY COVE DR.
City-St-Zip: ORLANDO, FL 32835 OR

Title: T () Delete
Name: POTAMI, ROCCO MR
Address: 6715 FAIRWAY COVE DR
City-St-Zip: ORLANDO, FL 32835 OR

Title: P () Delete
Name: POTAMI, ROCCO MR
Address: 6715 FAIRWAY COVE DR
City-St-Zip: ORLANDO, FL 32835 OR

Title: VP () Delete
Name: POTAMI, ROCCO MR
Address: 6715 FAIRWAY COVE DR
City-St-Zip: ORLANDO, FL 32835 OR

Title: O () Delete
Name: POTAMI, ROCCO MR
Address: 6715 FAIRWAY COVE DR
City-St-Zip: ORLANDO, FL 32835 OR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 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: ROCCO POTAMI

Electronic Signature of Signing Officer or Director

MR.

10/05/2005

Date