2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000005572

FILED Oct 21, 2005 Secretary of State

Entity Name: QUALITY MANAGEMENT & INVESTMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business:

13899 BISCAYNE BLVD, STE. 104 13899 BISCAYNE BLVD, STE. 110 NORTH MIAMI BEACH, FL 33181 NORTH MIAMI BEACH, FL 33181

Current Mailing Address: New Mailing Address:

P.O. BOX 4486 HOLLYWOOD, FL 33083-44

FEI Number: 56-2296857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEE, ANTHONY F

13899 BISCAYNE BLVD, STE. 104

NORTH MIAMI BEACH, FL 33181 US

LEE, ANTHONY F

13899 BISCAYNE BLVD, STE. 110

NORTH MIAMI BEACH, FL 33181 US

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: ANTHONY F LEE 10/21/2005

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 ().

AFFIAFRA AND DIDECTORS

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: LEE, ANTHONY F

Address: 12900 BISCAYNE BLVD, STE 104

Address: 13899 BISCAYNE BLVD, STE. 104 Address: 13899 BISCAYNE BLVD, STE. 110 City-St-Zip: NORTH MIAMI BEACH, FL 33181 City-St-Zip: NORTH MIAMI BEACH, FL 33181

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: ANTHONY F LEE P 10/21/2005