## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000060868

Entity Name: CQC SERVICES INC.

FILED Apr 23, 2007 Secretary of State

10453 SW 107TH AVE 282 SE WALLACE TER

MIAMI, FL 33174 PORT SAINT LUCIE, FL 34983 US

**Current Mailing Address: New Mailing Address:** 

10360 SW 11 ST 282 SE WALLACE TER

MIAMI, FL 33174 US PORT SAINT LUCIE, FL 34983 US

FEI Number: 43-2017033 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:

CASTILLO, CATALINA Q 10360 SW 11 ST

282 SE WÁLLACE TER MIAMI, FL 33174 US PORT SAINT LUCIE, FL 34983 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: 04/23/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CASTILLO, CATALINA Q

Title: DIRE ( ) Delete Title: (X) Change ( ) Addition CASTILLO, CATALINA Q DIRECTO CASTILLO, CATALINA Q DIRECTO Name: Name:

10360 SW 11ST 282 SE WALLACE TER Address: Address:

City-St-Zip: MIAMI, FL 33174 US City-St-Zip: PORT SAINT LUCIE, FL 33174 US

Title: VΡ Title: VΡ (X) Change ( ) Addition () Delete QUADRENY, IVETTE VP Name: QUADRENY, IVETTE VP Name:

10453 SW 107TH Address: 10543 SW 16 ST Address: MIAMI, FL 33174 MIAMI, FL 33165 City-St-Zip: City-St-Zip:

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

Name: DILEY, POLINI Name: 10360 SW 11 ST Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33174

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.

Ρ SIGNATURE: CATALINA Q CASTILLO 04/23/2007