

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125503

FILED
Jul 06, 2004
Secretary of State

Entity Name: QUARTER MILE PERFORMANCE CONCEPTS, INC.

Current Principal Place of Business:

617 SE 16TH ST
SUITE 4
FT LAUDERDALE, FL 33316

New Principal Place of Business:

3291 W SUNRISE BLVD
FT. LAUDERDALE, FL 33311

Current Mailing Address:

617 SE 16TH ST
SUITE 4
FT LAUDERDALE, FL 33316

New Mailing Address:

10661 NW 17 PL
PLANTATION, FL 33322

FEI Number: 80-0082611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIRD, IAN ESQ
269 N UNIVERSITY DR
SUITE F
PEMBROKE PINES, FL 33024 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

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: GOSINE, TROY
Address: 617 SE 16TH ST SUITE 4
City-St-Zip: FT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOSINE, TROY
Address: 10661 NW 17 PL
City-St-Zip: PLANTATION, FL 33322

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: TROY GOSINE

D

07/06/2004

Electronic Signature of Signing Officer or Director

Date