2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107074

Entity Name: QUESADA NETWORK, CORP.

FILED Apr 11, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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11500 MURRAY AVE 3802 CARROLLWOOD PL CIR LARGO, FL 33778

APT 109

TAMPA, FL 33624

Current Mailing Address: New Mailing Address:

11500 MURRAY AVE 3802 CARROLLWOOD PL CIR

APT 109 LARGO, FL 33778

TAMPA, FL 33624

FEI Number: 20-1831204 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

QUESADA, EDUARDO QUESADA, EDUARDO 11500 MURRAY AVE 3802 CARROLLWOOD PL CIR LARGO, FL 33778 TAMPA, FL 33624

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: EDUARDO QUESADA 04/11/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

QUESADA, EDUARDO Name: Name: QUESADA, EDUARDO

11500 MURRAY AVE 3802 CARROLLWOOD PL CIR APT 109 Address: Address:

City-St-Zip: LARGO, FL 33778 City-St-Zip: TAMPA, FL 33624

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

Name: QUESADA, ELENA Name: 11500 MURRAY AVE Address: Address: LARGO, FL 33778 City-St-Zip: City-St-Zip:

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

QUESADA, ANNABELL A Name: Name: 11500 MURRAY AVE Address: Address: City-St-Zip: LARGO, FL 33778 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: EDUARDO QUESADA PD 04/11/2005