

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000092908

Entity Name: Q & S MANAGEMENT, CORP

FILED
Oct 13, 2006
Secretary of State

Current Principal Place of Business:

8755 ALEGRE CIRCLE
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

8755 ALEGRE CIRCLE
ORLANDO, FL 32836

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
STE. 246
ORLANDO, FL 32819 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: ALINE G. SILVA

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: P () Delete
Name: ALBUQUERQUE, QUICIANO V
Address: 8755 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: V () Delete
Name: ALBUQUERQUE, SANDRA J
Address: 8755 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: T () Delete
Name: PEREIRA, OMAR JR
Address: 8755 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: ALBUQUERQUE, SANDRA G
Address: 8755 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: T (X) Change () Addition
Name: SILVA, ALINE G
Address: 8755 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

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.

SIGNATURE: ALINE G. SILVA

Electronic Signature of Signing Officer or Director

T

10/13/2006

Date