## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000143025

Entity Name: QUANTUM ELECTRICAL CONTRACTORS, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:		·	New Principal Place of Business:	
1270 HAND AVE			1450 NORTH US HIGHWAY 1	
SUITE A ORMOND BEACH, FL 32174			SUITE 700 ORMOND BEACH, FL 32174	
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
1270 HAND	AVE		1450 NORTH US HIG	HWAY 1
SUITE A		20.17.4	SUITE 700	00.174
ORMOND E	BEACH, FL 3	32174	ORMOND BEACH, FI	_ 32174
FEI Number:	51-0560982	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and Address of	of New Registered Agent:
WRIGHT, J		0.5		
	RBERRY PLA ST, FL 3216			
I ALIVI OUA	01,16 3210	4 60		
The above in the State		submits this statement for the	e purpose of changing its registere	d office or registered agent, or both,
iii tile State	oi Fiorida.			
SIGNATUR	RE:			
SIGNATUR		nic Signature of Registered A	Agent	 Date
	Electron	nic Signature of Registered <i>F</i>	Agent	 Date
Election Cam	Electron	g Trust Fund Contribution ( ).		Date  ES TO OFFICERS AND DIRECTOR
Election Cam	Electron  paign Financin  AND DIREC	g Trust Fund Contribution ( ).		
Election Cam  OFFICERS  Title:	Electron  paign Financin  AND DIREC	g Trust Fund Contribution ( ).  CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
Election Cam  OFFICERS  Title: Name: Address:	Electron  paign Financin  AND DIRECT  P ( WRIGHT, JOSI 13 WINTERBE	g Trust Fund Contribution ( ).  CTORS:  Delete EPH C RRY PLACE	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
Election Cam  OFFICERS  Title: Name: Address:	Electron  paign Financin  AND DIRECT  P ( WRIGHT, JOSE	g Trust Fund Contribution ( ).  CTORS:  Delete EPH C RRY PLACE	ADDITIONS/CHANG Title: Name:	ES TO OFFICERS AND DIRECTOR
Election Cam OFFICERS Title: Name: Address: City-St-Zip:	Electron  paign Financin  AND DIREC  P ( WRIGHT, JOSI 13 WINTERBE PALM COAST,	g Trust Fund Contribution ( ).  CTORS:  ) Delete EPH C RRY PLACE FL 32164	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
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I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: ARTHUR RUBINSTEIN POA 04/17/2009

6091 SPRUCE POINT CIRCLE

PORT ORANGE, FL 32128

Address:

City-St-Zip: