

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000155303

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** THIRD PARTY VERIFICATION CONSULTANTS, INC.

**Current Principal Place of Business:**

7405 S.W. 122ND STREET  
PINECREST, FL 331565211 US

**New Principal Place of Business:**

**Current Mailing Address:**

7405 S.W. 122ND STREET  
PINECREST, FL 331565211 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

QUINN, JOHN J. J.  
7405 S.W. 122ND STREET  
PINECREST, FL 331565211 US

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

QUINN, JOHN J. J.  
7405 S.W. 122ND STREET  
PINECREST, FL 331565211 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: JOHN J J QUINN

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: QUINN, JOHN J J  
Address: 7405 S.W. 122ND STREET  
City-St-Zip: PINECREST, FL 331565211 US

Title: VP.  
Name: QUINN, GLADYS M  
Address: 7405 S.W. 122ND STREET  
City-St-Zip: PINCREST, FL 331565211 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN J J QUINN

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date