

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000039672

FILED
Jun 14, 2012
Secretary of State

Entity Name: QMAN PERRY INVESTMENTS, CORP

Current Principal Place of Business:

2916 W WATERS AVE
SUITE A-2
TAMPA, FL 33614

New Principal Place of Business:

8825 W. ROBSON ST.
TAMPA, FL 33615

Current Mailing Address:

2916 W WATERS AVE
SUITE A-2
TAMPA, FL 33614

New Mailing Address:

PO BOX 15935
TAMPA, FL 33684

FEI Number: 20-4532175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINONES, WILFRED P SR
2916 W WATERS AVE
SUITE A-2
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

QUINONES, WILFRED P SR
8825 W. ROBSON ST
TAMPA, FL 33615 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:

06/14/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: QUINONES, WILFRED P SR
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33684

Title: VP/S
Name: QUINONES, DAVID A
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33684

Title: SH
Name: QUINONES, WILFRED JR
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33614

Title: SH
Name: QUINONES, JENIFER
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33614

Title: SH
Name: QUINONES, EILEEN
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33614

Title: SH
Name: RODRIGUEZ, VENUS
Address: PO BOX 15935
City-St-Zip: TAMPA, FL 33684

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: WILFRED P QUINONES

P

06/14/2012

Electronic Signature of Signing Officer or Director

Date