2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# P06000061552

Entity Name: AQPE CORPORATION

Current Principal Place of Business:

4865 NW 4 ST
MIAMI, FL 331262121

New Principal Place of Business:

4865 NW 4 ST
MIAMI, FL 331262121 US

Current Mailing Address:

4865 NW 4 ST
MIAMI, FL 331262121

New Mailing Address:

4865 NW 4 ST
MIAMI, FL 331262121 US

FEI Number: 20-8520975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINTERO, ALFREDO
4865 NW 4 ST
MIAMI, FL 331262121 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: _____
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: QUINTERO, ALFREDO
Address: 4865 NW 4 ST
City-St-Zip: MIAMI, FL 331262121

Title: D ( ) Delete
Name: QUINTERO, ALFREDO JR.
Address: 4741 SW 162 PL
City-St-Zip: MIAMI, FL 33185

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: QUINTERO, ALFREDO
Address: 4865 NW 4 ST
City-St-Zip: MIAMI, FL 331262121 US

Title: S (X) Change ( ) Addition
Name: QUINTERO, ALFREDO JR.
Address: 4741 SW 162 PL
City-St-Zip: MIAMI, FL 331855154 US

Title: VP ( ) Change (X) Addition
Name: QUINTERO, ALFREDO JR.
Address: 4741 SW 162 PL
City-St-Zip: MIAMI, FL 331855154 US

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.

SIGNATURE: ALFREDO QUINTERO PD 03/13/2009
Electronic Signature of Signing Officer or Director — Date