

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123788

Entity Name: QWIK PIX HANGERS, INC

FILED  
Apr 15, 2008  
Secretary of State

## Current Principal Place of Business:

654 HIBISCUS DR  
HALLANDALE, FL 33009

## New Principal Place of Business:

654 HIBISCUS DR  
HALLANDALE BEACH, FL 33009

## Current Mailing Address:

654 HIBISCUS DR  
HALLANDALE, FL 33009

## New Mailing Address:

654 HIBISCUS DR  
HALLANDALE BEACH, FL 33009

FEI Number: 20-5613618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TESTA, GRACE  
654 HIBISCUS DR  
HALLANDALE, FL 33009 US

## Name and Address of New Registered Agent:

TESTA, GRACE  
654 HIBISCUS DR  
HALLANDALE BEACH, FL 33009 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:

04/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHLAIS, RICHARD  
Address: 654 HIBISCUS DR  
City-St-Zip: HALLANDALE, FL 33009

Title: VP ( ) Delete  
Name: TESTA, GRACE  
Address: 654 HIBISCUS DR  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHLAIS, RICHARD  
Address: 654 HIBISCUS DR  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VP (X) Change ( ) Addition  
Name: TESTA, GRACE  
Address: 654 HIBISCUS DR  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: GRACE TESTA

VP

04/15/2008

Electronic Signature of Signing Officer or Director

Date