

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000028778

FILED
Apr 29, 2009
Secretary of State

Entity Name: Q-MARKETING AND DEVELOPMENT GROUP CORPORATION

Current Principal Place of Business:

2315 NW 107 AVE., STE. 1M-17, BOX 52
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2315 NW 107 AVE., STE. 1M-17, BOX 52
DORAL, FL 33172

New Mailing Address:

FEI Number: 20-8811708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTONINI, GUILLERMO
2315 NW 107 AVE., STE. 1M-17, BOX 52
DORAL, FL 33172 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: P () Delete
Name: ESPINOZA, ISABEL
Address: 2315 NW 107 AVE., STE. 1M-17, BOX 52
City-St-Zip: DORAL, FL 33172

Title: T () Delete
Name: RODRIGUEZ, ANABELLA
Address: 2315 NW 107 AVE., STE. 1M-17, BOX 52
City-St-Zip: DORAL, FL 33172

Title: S () Delete
Name: DE ARMAS, MILAGROS
Address: 2315 NW 107 AVE., STE. 1M-17, BOX 52
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ISABEL ESPINOZA

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date