

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000016537

Entity Name: QUALITY HANDS, INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

320 86 ST, SUITE 06  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

320 86 ST, SUITE 06  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 27-5019153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SABATE, VERONICA  
320 86 ST, SUITE 06  
MIAMI BEACH, FL 33141 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SABATE, VERONICA  
Address: 320 86 ST, SUITE 06  
City-St-Zip: MIAMI BEACH, FL 33141 VP

Title: VP  
Name: CORREA, RICHARD  
Address: 320 86 ST, SUITE 06  
City-St-Zip: MIAMI BEACH, FL 33141

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: VERONICA SABATE

P

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date