


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000085749 1. Entity Name QUINLAND INC.	
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Principal Place of Business 11269 SW 164 ST MIAMI, FL 33157 US	Mailing Address 11269 SW 164 ST MIAMI, FL 33157 US
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02122004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0489546	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

KORETZKY, DAVID A
 111 S.W. 3RD STREET
 PENTHOUSE
 MIAMI, FL 33130

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD QUINLAND, SAMUEL A 11269 SW 164 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD QUINLAND, VIVIAN L 11269 SW 164 STREET MIAMI, FL
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 02/16/04-20164-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like entries.

SIGNATURE: Vivian L Quinland Date: 2-13-04 Daytime Phone #: 305 375 1637
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vivian L Quinland