

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 07, 2006 8:00 am
Secretary of State

07-07-2006 90002 005 ***150.00

DOCUMENT # P94000074725	
1. Entity Name QUICK SERVICE DISCOUNT BEVERAGE, INC.	

Principal Place of Business 5050 S. CONWAY ROAD ORLANDO, FL 32812	Mailing Address 5050 S. CONWAY ROAD ORLANDO, FL 32812
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50021796



07022006 No Chg-P CR2E03A (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3273698	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required.	

6. Name and Address of Current Registered Agent SOLEIMANI, KAMRAN 5050 S. CONWAY ROAD ORLANDO, FL 32812	
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**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLEIMANI, KAMRAN 5050 S. CONWAY ROAD ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLEIMANI, CAROL 5050 S. CONWAY ROAD ORLANDO, FL 32812
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 prepare 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 fees empowered.

SIGNATURE:

Kamran Soleimani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/06

KAMRAN
Soleimani

ATTACHMENT

~~50021794~~
#P94000074725

Due to not received the
Form in my mail, I called
your office on 7/3/06 and
he told me to write this note
and send \$150.00 ck # with it

Thank You.

K. Hart-Holmes

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