2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 03, 2004
Secretary of State

DOCUMENT# P96000018506

Entity Name: ALBION QUALITY MANAGEMENT SYSTEMS, INC.

Current Principal Place of Business:

2520 NW 97TH AVE
#110
MIAMI, FL 33172 US

New Principal Place of Business:

40 RAILROAD AVE
VALLEY STREAM, NY 11580 US

Current Mailing Address:

2520 NW 97TH AVE
#110
MIAMI, FL 33172 US

New Mailing Address:

40 RAILROAD AVE
VALLEY STREAM, NY 11580 US

FEI Number: 11-3310406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANTANGELO, PETER
12020 NW 2 DRIVE
CORAL SPRINGS, 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete
Name: SANTANGELO, PETER
Address: 2520 NW 97TH AVE #110
City-St-Zip: MIAMI, FL 33172 US

Title: MD ( ) Delete
Name: TITLEY, ANDREW D
Address: 265 E MERRICK RD #207
City-St-Zip: VALLEY STREAM, NY 11580 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition
Name: SANTANGELO, PETER
Address: 12020 NW 2 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33172 US

Title: MD (X) Change ( ) Addition
Name: TITLEY, ANDREW D
Address: 40 RAILROAD AVE
City-St-Zip: VALLEY STREAM, NY 11580 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER SANTANGELO PTS 11/03/2004
Electronic Signature of Signing Officer or Director Date