

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000051743

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** QUALITY MANAGEMENT NORTH AMERICA, INC.

**Current Principal Place of Business:**

5825 SUNSET DRIVE  
SUITE 209  
MIAMI, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

6800 SW 40TH ST  
BOX 405  
MIAMI, FL 33155 US

**New Mailing Address:**

5825 SUNSET DRIVE  
SUITE 209  
MIAMI, FL 33143 US

**FEI Number:** 65-0687358

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WARD, KEITH  
5825 SUNSET DRIVE  
SUITE 209  
MIAMI, FL 33143 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: D  
Name: WARD, KEITH T  
Address: 5825 SUNSET DRIVE, STE 209  
City-St-Zip: MIAMI, FL 33143

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: KEITH WARD

D

02/18/2010

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

\_\_\_\_\_  
Date