

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052312

FILED  
Jan 07, 2006  
Secretary of State

Entity Name: QUARK CONSULTING, INC.

**Current Principal Place of Business:**

1619 NE 194TH ST.  
N. MIAMI BEACH, FL 33179 US

**New Principal Place of Business:**

**Current Mailing Address:**

1619 NE 194TH ST.  
N. MIAMI BEACH, FL 33179 US

**New Mailing Address:**

FEI Number: 65-0668904      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEINWAND, JONATHAN D  
12955 BISCAYNE BLVD.  
SUITE 402  
NORTH MIAMI, FL 33181 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 ( ) Delete  
Name: LEINWAND, JONATHAN  
Address: 12955 BISCAYNE BLVD., SUITE 402  
City-St-Zip: NORTH MIAMI, FL 33181

Title: P ( ) Delete  
Name: LEINWAND, HOLLY  
Address: 12955 BISCAYNE BLVD., SUITE 402  
City-St-Zip: NORTH MIAMI, FL 33181 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: HOLLY LEINWAND

P

01/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date