

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052312

Entity Name: QUARK CONSULTING, INC.

FILED
Jan 09, 2007
Secretary of State

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:

LEINWAND, JONATHAN D
9050 PINES BLVD.
SUITE 255
PEMBROKE PINES, FL 33024 US

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: JONATHAN LEINWAND

01/09/2007

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: D (X) Change () Addition
Name: LEINWAND, JONATHAN
Address: 9050 PINES BLVD SUITE 255
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: P (X) Change () Addition
Name: LEINWAND, HOLLY
Address: 1619 PRESIDENTIAL WAY
City-St-Zip: NORTH MIAMI, FL 33179 US

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

01/09/2007

Electronic Signature of Signing Officer or Director

Date