## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000084138

Entity Name: QUADRANT MANAGEMENT GROUP, INC.

**FILED** Apr 30, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

C/O JANICE RUSSELL ONE SE 3RD AVE C/O CPA 2020 PONCE DE LEON BLVD 25TH FLOOR

1007

MIAMI, FL 33131 CORAL GABLES, FL 33134

**Current Mailing Address: New Mailing Address:** 

C/O JANICE RUSSELL ONE SE 3RD AVE C/O CPA 2020 PONCE DE LEON BLVD 25TH FLOOR

MIAMI, FL 33131 CORAL GABLES, FL 33134

FEI Number: 65-0825183 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC. MENENDEZ, ORLANDO 515 EAST PARK AVE C/O CPA 2020 PONCE DE LEON BLVD, SUITE 100

TALLAHASSEE, FL 32301 CORAL GABLES, FL 33134 US 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: ORLANDO MENENDEZ 04/30/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

ARAUJO, CARLOS E. Name:

VIP SAL NO. 1196 P.O. BOX 0245364 Address:

City-St-Zip: MIAMI, FL 33102 US

Title: DS

Name: ARAUJO, ARMANDO

1 AVE LA BRIGADA 13-30 ZONA 7 COL SAN IGNA Address:

GUATEMALA, GU 01064 GU City-St-Zip:

Title: DT

ARAUJO, FEDERICO Name:

2600 SW 3RD AVENUE, SUITE 450 Address:

City-St-Zip: MIAMI, FL 33129

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: CARLOS ARAUJO DP 04/30/2012