2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 11, 2008 08:00 A Secretary of State **DOCUMENT # P99000007429** 1. Entity Name QUEBEC INTERNATIONAL, INC. Principal Place of Business Mailing Address 12864 BISCAYNE BLVD 12864 BISCAYNE BLVD **SUITE #217** SUITE #217 NORTH MIAMI, FL 33181 NORTH MIAMI, FL 33181 04062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 62-1766390 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIULIANI, GINETTE DO NOT WRITE 2840 N.E. 26TH ST. FORT-LAUDERDALE, FL 33305 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE WOLFF, RUFÚS NAME STREET ADDRESS 900 S SHACKLE FORD CITY-ST-ZIP LITTLE ROCK, AR 72211 TITLE 1100000092869 GIULIANI, GINETTE NAME 04/23/08-20083-009::158::75 STREET ADDRESS 12864 BISCAYNE BLVD, SUITE #217 CATY-ST-ZIP NORTH MIAMI, FL 33181 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11. changed, or on an attachment with an agdress

SIGNATURE:

BILE NAME STREET ADDRESS CITY-ST-ZIP