2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P99000031429

Entity Name: QUEST SPORT, INC.

Current Principal Place of Business:

9363 SW 182 ST
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

9363 SW 182 ST
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0908520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AQUILA, JASON
9363 SW 182 ST
MIAMI, FL 33157 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: P ( ) Delete
Name: AQUILA, JASON
Address: P.O. BOX 566452
City-St-Zip: PINECREST, FL 33256

Title: V ( ) Delete
Name: HEARNS, MICHAEL
Address: P.O. BOX 566452
City-St-Zip: PINECREST, FL 33256

Title: S ( ) Delete
Name: AQUILA, NATALIA
Address: P.O. BOX 566452
City-St-Zip: PINECREST, FL 33256

Title: D ( ) Delete
Name: HEARNS, TYRA
Address: P.O. BOX 566452
City-St-Zip: PINECREST, FL 33256

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: O ( ) Change (X) Addition
Name: ANSARI, USMAN M
Address: P.O. BOX 566452
City-St-Zip: PINECREST, FL 33256

I hereby certify that the information supplied with this filing does not qualify 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: JASON AQUILA JA 03/24/2009
Electronic Signature of Signing Officer or Director Date