## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000063786

City-St-Zip:

MIAMI, FL 33175

FILED Jan 16, 2008 Secretary of State

Entity Name: Q'S CONSTRUCTION INC. **Current Principal Place of Business: New Principal Place of Business:** 7005 N. WATERWAY DR., SUITE 305 MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 7005 N. WATERWAY DR., 305 MIAMI, FL 33155 FEI Number: 65-1150645 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALL FLORIDA FIRM, INC DE ARMAS, ALFREDO 465 S VOLUSIA AVÉ STE C 3211 PONCE DE LEON BLVD ORANGE CITY, FL 32763 US 302 CORAL GABLES, FL 33134 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: ALDREDO DE ARMAS 01/16/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition QUERO, ALFRED A Name: Name: 1769 WAKEENA DRIVE Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: QUERO, ALFRED F Name: 1769 WAKEENA DRIVE Address: Address: MIAMI, FL 33133 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition TORRES, ARLENE Name: TORRES, ARLENE Name: 14214 SW 53 ST. 112 CAMBRIDGE AVENUE Address: Address:

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.

City-St-Zip:

DAVENPORT, FL 33896

SIGNATURE: ARLENE TORRES S 01/16/2008