


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000086849	
1. Entity Name QUANTEX MEDIA SALES, INC.	

Principal Place of Business _____	Mailing Address _____
3736 SW 30 AVE FORT LAUDERDALE, FL 33312	3736 SW 30 AVE FORT LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE



03162005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0958026	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MEYER, LUTZ H 3736 SW 30TH AVE FORT LAUDERDALE, FL 33312	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

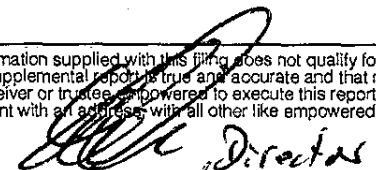
9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**000000279087
03/28/05-80052-016 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEYER, LUTZ H 5521 REYNOLDS RD. LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD VERITE, JORDI FERRANDO 115 E. DI LIDO DR. MIAMI BEACH, FL 33139
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, as empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **Director** **3/24/05** **854 749 797**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #