

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086849

Entity Name: QUANTEX MEDIA SALES, INC.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

3736 SW 30 AVE
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3736 SW 30 AVE
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0958026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, LUTZ H
3736 SW 30TH AVE
FORT LAUDERDALE, FL 33312 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: PD () Delete
Name: MEYER, LUTZ H
Address: 5521 REYNOLDS RD.
City-St-Zip: LAKE WORTH, FL 33467

Title: VSD () Delete
Name: MEYER, MARY L
Address: 5521 REYNOLDS RD.
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MEYER, LUTZ H
Address: 5521 REYNOLDS RD.
City-St-Zip: LAKE WORTH, FL 33449

Title: VSD (X) Change () Addition
Name: MEYER, MARY L
Address: 5521 REYNOLDS RD.
City-St-Zip: LAKE WORTH, FL 33449

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: LUTZ H. MEYER

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date