

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2005 8:00 am**  
**Secretary of State**

03-16-2005 90047 039 \*\*\*150.00

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02042005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P99000088343</b> 1. Entity Name <b>QUORUM INVESTMENTS INC.</b>							
Principal Place of Business 3129 N. 29 AVENUE HOLLYWOOD, FL 33020			Mailing Address 3710 N 37 TERR HOLLYWOOD, FL 33021				
2. Principal Place of Business <i>4651 Sheridan St</i>		3. Mailing Address <i>4651 Sheridan St</i>		4. FEI Number <b>65-0955501</b> Applied For <input type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required			
Suite, Apt. #, etc. <i>303</i>		Suite, Apt. #, etc. <i>303</i>					
City & State <i>Hollywood, FL</i>		City & State <i>Hollywood, FL</i>					
Zip <i>33021</i>		Zip <i>33021</i>					
Country <i>USA</i>		Country <i>U.S.A.</i>		6. Name and Address of Current Registered Agent GHITIS, LEO 3710 N 37 TERR HOLLYWOOD, FL 33021			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>4651 Sheridan St. Suite 303</i>		City <i>Hollywood FL</i>				Zip <i>33021</i>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE _____	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHITIS, LEO 3129 N. 29 AVENUE HOLLYWOOD, FL 33020		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>4651 Sheridan St, Ste 303</i> <i>Hollywood, FL 33021</i>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 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: <i>Leo Ghitis</i> <span style="float: right;">954-962 8160</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							