2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89126

FILED Apr 08, 2008 Secretary of State

Entity Name: QUINTESSENCE ENTERPRISES, INC.

Current Principal Place of Business:		ce of Business:	New Principal Place of Business:	
1232 CR 1 DUNEDIN	FL 34698	US		
Current Mailing Address:		ess:	New Mailing Address:	
1232 CR 1 DUNEDIN	FL 34698	US		
El Number	59-3089791	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address o	of New Registered Agent:
	STEARNS, HURST RD	P.A. US		
	1 6 04000			
Γhe above			purpose of changing its registered	d office or registered agent, or both,
Γhe above	named entit e of Florida. RE:	y submits this statement for the		d office or registered agent, or both,
Γhe above n the State	named entit e of Florida. RE:			d office or registered agent, or both, Date
The above n the State SIGNATUI	named entit e of Florida. RE: Electr	y submits this statement for the		
The above n the State BIGNATUI	named entit e of Florida. RE: Electr	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution ().	gent	
The above n the State BIGNATUI	named entite of Florida. RE: Electronpaign Finance S AND DIRE VPTD LEONARDO, 1737 ARABIA	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CCTORS: () Delete MICHAEL	gent	Date
The above n the State SIGNATUI Election Car OFFICER: Value: Value: Value: Value:	named entite of Florida. RE: Electronpaign Finance S AND DIRE VPTD LEONARDO, 1737 ARABIA PALM HARBO PSD LEONARDO, 1737 ARABIA	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CCTORS: () Delete MICHAEL NN LANE DR, FL 34685 US () Delete DORIS	gent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: DORIS LEONARDO PRES 04/08/2008