

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005105

Entity Name: QUOTA INTERNATIONAL OF PLANTATION, INC.**Current Principal Place of Business:**5231 NW 99TH AVE
SUNRISE, FL 33351**Current Mailing Address:**5231 NW 99TH AVE
SUNRISE, FL 33351 US**FEI Number: 52-1973460****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRAMSON, GAYLE
5231 NW 99TH AVE
SUNRISE, FL 33351 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:** GAYLE BRAMSON

03/30/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	BRAMSON, GAYLE
Address	5231 NW 99TH AVE
City-State-Zip:	SUNRISE FL 33351

Title	VD
Name	STEINMULLER, MARILYN
Address	1233 NW 113 TH TERRACE
City-State-Zip:	CORAL SPRINGS FL 33071

Title	TD
Name	BURNSIDE, KAREN
Address	1811 E. OAK KNOLL CIRCLE
City-State-Zip:	DAVIE FL 33324

Title	SD
Name	POLLINA, DOREEN
Address	471 N. PINE ISLAND #201
City-State-Zip:	PLANTATION FL 33324

Title	D
Name	WALLACE, DONNA
Address	2110 SW 97TH LANE
City-State-Zip:	DAVIE FL 33324

Title	D
Name	LASKY, JOY
Address	1801 ELEUTHERA PL. K-1
City-State-Zip:	COCONUT CREEK FL 33066

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN BURNSIDE**TREASURER**

03/30/2016

Electronic Signature of Signing Officer/Director Detail

Date