

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F65129

FILED  
Mar 21, 2006  
Secretary of State

Entity Name: QUALITY SERVICE CONTRACTORS, INC.

**Current Principal Place of Business:**

C/O ISAAC RODRIGUEZ  
P O BOX 660848  
MIAMI SPRINGS, FL 33266

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ISAAC RODRIGUEZ  
P O BOX 660848  
MIAMI SPRINGS, FL 33266

**New Mailing Address:**

FEI Number: 59-2165178      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MILAGROS RODRIGUEZ  
1241 FALCON AVENUE  
MIAMI SPRINGS, FL 33166      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: VS ( ) Delete  
Name: MILAGROS, RODRIGUEZ  
Address: 1241 FALCON AVE  
City-St-Zip: MIAMI SPRINGS, FL

Title: PD ( ) Delete  
Name: RODRIGUEZ, ISAAC  
Address: 1241 FALCON AVE.  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: BLEIBEL, AMIRA  
Address: 1241 FALCON AVE.  
City-St-Zip: MIAMI SPRINGS, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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: ISAAC RODRIGUEZ

PD

03/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date