

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000505

FILED
Apr 10, 2008
Secretary of State

Entity Name: ABS QUALITY EVALUATIONS, INC.

Current Principal Place of Business:

16855 NORTHCHASE DRIVE
HOUSTON, TX 77060

New Principal Place of Business:

Current Mailing Address:

16855 NORTHCHASE DRIVE
HOUSTON, TX 77060 US

New Mailing Address:

FEI Number: 22-3067354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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: AIF () Delete
Name: KIMBRELL, ROBERT
Address: 1650 HIGHWAY 6, SUITE 100
City-St-Zip: SUGAR LAND, TX 77478

Title: PD () Delete
Name: RUSSO, CHUCK
Address: 16855 NORTHCHASE DRIVE
City-St-Zip: HOUSTON, TX 77060 US

Title: CD () Delete
Name: NASSIF, TONY
Address: 16855 NORTHCHASE DRIVE
City-St-Zip: HOUSTON, TX 77060 US

Title: S () Delete
Name: BARTON, SARAH M
Address: 16855 NORTHCHASE DRIVE
City-St-Zip: HOUSTON, TX 77060 US

Title: DTV () Delete
Name: WEINER, JEFFREY J
Address: 16855 NORTHCHASE DRIVE
City-St-Zip: HOUSTON, TX 77060 US

Title: D () Delete
Name: NASSIF, TONY
Address: 16855 NORTHCHASE DRIVE
City-St-Zip: HOUSTON, TX 77060 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AIF (X) Change () Addition
Name: KIMBRELL, ROBERT D
Address: 1650 HIGHWAY 6, SUITE 100
City-St-Zip: SUGAR LAND, TX 77478

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

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

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

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

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

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: ROBERT D KIMBRELL

AIF

04/10/2008

Electronic Signature of Signing Officer or Director

_____ Date