2008 FOR PROFIT CORPORATION

FILED Jan 22, 2008 8:00 am Secretary of State

	ANNUAL REPORT
Ì	DOCUMENT # CG/172

1. Entity Name QUALITY STARTER AND ALTERNATOR SERVICE, INC.						01-22-2008 9	0079 009 ****1	50.00	
Principal Plac	e of Business			8000p	1.				
23380 JANIC Port Charl	CE AVE OTTE, FL 33980	Mailing Address 1840 SOUTH COMBEE ROAD LAKELAND, FL 33801			dan				
Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01022008	Chg-P	CR2E034 (12/	06)	
City & Stat	е	City & State		4. FEI Number 59-2336			Applied For Not Applicable		
Zip ~ ·	Country	Zip	Countr	ry	_5Certificate o	of Status Desired	□ \$8.75 Fee Red	Additional juired	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R	egistered Agent		
STANDIFE	ER, R. THOMAS II			Name			·		
	TH COMBEE ROAD D, FL 33801	•		Street Address	s (P.O. Box Number	r is Not Acceptable	·)		
		7	ļ	City			Zip.	Code	
							PL		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its	registere	d office or regist	tered agent, or both	n, in the State of Fio	orida. I am familiar i	vith, and accept	
SIGNATURE Signature, typed or printing name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	signature, typed or printing name of registered agent	алотпеларркавня. (NO)	h: Registered	Agent signature (equi)	ted when telustering)		DAIL		
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I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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: QLA & LANGE PELS
SIGNATURE AND TYPED OF PRINTED RAME OF SIGNING OFFICER OR DIRECTOR