2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 21, 2004 8:00 am Secretary of State

1. Entity Nam	MEN I # K / 5542 OUTBOARD SERVICES, I	NC.			The state of the s	05-21-200	04 90003	010 ****1	38./3
4270 NW 113TH AVE 4		Mailing Address 4270 NW 113TH AVE SUNRISE, FL 33323	4270 NW 113TH AVE		54055191				
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		·	04302004	Chg-P	CR2E0	34 (10/03)	
City & State	е	City & State			4. FEI Number 65-0110	655	,,,,,,,,,,,,,,		olied For t Applicable
Zip	Country	Zip	Coun	try	5. Certificate of	Status Desired	_12/	\$8.75 Add Fee Required	itional
	6. Name'and Address of Current	Registered Agent		News	7. Name and A	ddress of New	Registered A	gent	
	ESS, JAMES P. 113TH AVE FL 33323			Name Street Addres	s (P.O. Box Number	is Not Acceptab	l e)		
		•		City			FL	Zip Code)
	named entity submits this statement folions of registered agent. Signature, typed or printed name of registered agent	and tills if applicable. (NO	DTE: Registere	d Agent signature requ	ired when reinstaling)	in the State of F	DATE	amiliar with,	and accept
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Camp Trust Fund Cor			55.00 May Be added to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OF	FICERS AND	DIRECTORS	IN 11
TITLE? NAME STREET ADDRESS CITY-SY-ZIP	PTD MCGUINNESS, JAMES P. 4270 NW 113TH AVE SUNRISE, FL	. 🔲 Delete		ŀ				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MCGUINNESS, VIRGINIA K. 4270 NW 1.13TH AVE SUNRISE, FL	□ Delete		ı				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- Delete		i	*		-	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						□ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	- 1	1				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		ı				☐ Change	Addition

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 a other like empowered.

SIGNATURE: 1

Hachment

54055791

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 30, 2004

QUALITY OUTBOARD SERVICES, INC. 4270 NW 113TH AVE SUNRISE, FL 33323

SUBJECT: QUALITY OUTBOARD SERVICES, INC. Ref. Number K75542

We have received your document for QUALITY OUTBOARD SERVICES, INC. and check(s) totaling \$158.75. However, your check(s) and document are being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers Document Specialist

Letter Number: 604A00029317

S/19/04
Subnitting As INSTRUCTED

. Completed Form
. CHECK # 3412
. ORIGINALLY SubnitTED FORM
. ORIGINALLY SubnitTED FORM



Division of Corporations

Annual Report

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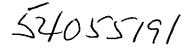
Document Number

FEI Number	650110655
FEI Number Status	● Applied For ● Not Applicable ● Current
Certificate of Status I	Desired Yes No - \$8.75 each
	Principal Place of Business
Address	4270 NW 113TH AVE
Suite, Apt. #, etc.	
City, State	SUNRISE FL
Zip Code & Country	33323
	Mailing Address
Address	4270 NW 113TH AVE
Suite, Apt. #, etc.	
City, State	SUNRISE , FL
Zip Code & Country	33323
Nomo	And Address of Desistered Acous
Name (Last, First, Middle, Title)	And Address of Registered Agent
-or- RA Business Name	MCGUINNESS, JAMES P.
Address	4270 NW-113TH AVE
Suite, Apt. #, etc.	
City, State	SUNRISE FL
Zip Code & Country	33323
Zip Code & Country	155525



attachment

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Document Number

K75542

Business Entity Name

QUALITY OUTBOARD SERVICES, INC.

Election Campaign Financing Trust Fund Contribution • Yes • No

 Offic	cer/Director Name And Address
Title	РТО
Name (Last, First, Middle, Title)	
-or- Entity Name	MCGUINNESS, JAMES P.
Street Address	4270 NW 113TH AVE
City, State	SUNRISE FL
Zip Code & Country	
Title	VSD
 Name (Last, First, Middle, Title)	
-or- Entity Name	MCGUINNESS, VIRGINIA K.
Street Address	4270 NW 113TH AVE
City, State	SUNRISE FL
Zip Code & Country	
 Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last First Middle Title)	

. Division of	Corporations	Machinent	Page 2 of 2
	City, State Zip Code & Country		#K75542 5405519
,	'Officer/Direct not allowed in Title	named above must type their name in the tor Signature' block below. A corporate name in this block. Signature TANES P.H.Gunning Sans-Fill.	, , , , , ,
<i>,</i>		Continue Reset	figiranians of
		59ar (0y4-)	

Public Access Help

Sunbiz Home Page