

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000365520

**Entity Name:** QUALITY SOUND RENTAL LLC

**Current Principal Place of Business:**

610 SW 11TH ST  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

245 NE 191 ST  
3005  
MIAMI, FL 33179 US

**FEI Number:** 85-4124516

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           TELFORT, STANLEY  
Address        610 SW 11TH ST  
City-State-Zip: HALLANDALE BEACH FL 33009

Title           AUTHORIZED REPRESENTATIVE  
Name           TELFORT, PAULLAINNE  
Address        245 NE 191 ST  
                  3005  
City-State-Zip: MIAMI GARDENS FL 33179

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STANLEY TELFORT**

**MANAGER**

**04/04/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date