

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 355267

FILED
Mar 23, 2004
Secretary of State

Entity Name: QUALITY IMPORTS INC

Current Principal Place of Business:

1006 N BEAL
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

1006 N BEAL
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 59-1291578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEEFE, LARRY
909 MARWAIT DR., STE 1014
FORT WALTON BEACH, FL 32547 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: PD () Delete
Name: HOLLINGSWORTH, G M,
Address: 217 PATRICK DR
City-St-Zip: FT WALTON BEACH, FL

Title: STD () Delete
Name: REEVES, DOYLE,
Address: 9818 HWY 98 W
City-St-Zip: DESTIN, FL

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: VP () Change (X) Addition
Name: MARSTELLER, MATT C VP
Address: 958 DON DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: G. M. HOLLINGSWORTH

DP

03/23/2004

Electronic Signature of Signing Officer or Director

_____ Date