

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 474614

FILED
Mar 13, 2007
Secretary of State

Entity Name: QUALITY INDUSTRIES OF AMERICA, INC.

Current Principal Place of Business:

3631 US 90 EAST
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

P O BOX 1949
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-1608537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'DONNELL, JAMES D.
1648 OSCEOLA STREET
JACKSONVILLE, FL 32204 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: C () Delete
Name: MESSER SR, FLOYD W,
Address: POB 1949 US 90 E
City-St-Zip: LAKE CITY, FL

Title: CEO () Delete
Name: STORTZ, JEFFREY
Address: POB 1949
City-St-Zip: LAKE CITY, FL 320561949

Title: VP () Delete
Name: BROWN, JAMES III
Address: POB 1949
City-St-Zip: LAKE CITY, FL 320561949

Title: VP () Delete
Name: DRYDEN, EDWARD D
Address: POB 1949
City-St-Zip: LAKE CITY, FL 320561949

Title: VP () Delete
Name: MESSER, GUY D
Address: POB 1949
City-St-Zip: LAKE CITY, FL 320561949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JEFFREY STORTZ

CEO

03/13/2007

Electronic Signature of Signing Officer or Director

Date