

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000005746	
1. Entity Name QUALITY COMMUNICATIONS & ALARM COMPANY, INC	

Principal Place of Business 1985 SWARTHMORE AVENUE, SUITE #4 LAKEWOOD, NJ 08701	Mailing Address 1985 SWARTHMORE AVENUE, SUITE #4 LAKEWOOD, NJ 08701
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DO NOT WRITE IN THIS SPACE



03272008 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3400116	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, STE 4 WESTON, FL 33331

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8. 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. I am familiar with, and accept the obligations of registered agent.

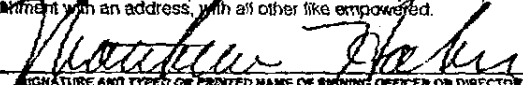
SIGNATURE _____	(NOTE: Registered Agent signature required when restarting)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000489010 04/17/06-80029-015 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHUBIGER, RICHARD 112 WEST CIRCLE DR LEXINGTON, SC 29072
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORTIER, BRIAN 1985 SWARTHMORE AVENUE, SUITE #4 LAKEWOOD, NJ 08701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HABER, MATTHEW 1985 SWARTHMORE AVENUE, SUITE #4 LAKEWOOD, NJ 08701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HIDALGO, ANDREW ONE EAST UWCHLAN AVE, SUITE 301 EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC HEATER, JOSEPH ONE EAST UWCHLAN AVE, SUITE 301 EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	3/28/06	732-730-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #