2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 8:00 am

| Secretary of State O4-23-2007 90265 014 ***150.00 Whiting Address O4-23-2007 90265 014 ***150.00 ABUILTE MANAGEMENT CORP. Whiting Address PPD B0X 76009 SEASTINA, TA 32935 US Principal Place of Business Malling Address PPD B0X 76009 SEASTINA, TA 32938 ABUILT | | | - IXEI OIVI | | | A | í • • | (4 4 |
|--|--|--|----------------------------------|---|--------------------------------|----------------------------|--|--|
| 4.550 US ONE GRANT, FL 32905 US SEBSTINK, FL 32978 2. Principal Place of Business - No P.O. Box # 3. Mailing Address | Entity Name QUAL-TEC MANAGEMENT CORP. | | | | | | - | |
| SUBJ. Apl. 4, etc. Suite, Apl. 4, etc. Suite, Apl. 4, etc. Suite, Apl. 4, etc. O4152007 Chgp CR26034 (12/08) | Principal Plac | e of Business | Mailing Address | | | | | |
| Suito, Apt. #, etc. | 4550 US ONE - | | PO BOX 780309 | | 40000 | U • | | |
| Suito, Apt. #, etc. | ı | | | | | . Jejir jirah bahi bahil j | Bin sani Bein eam Jena medi i | ONTERFOLD PROL |
| City & State Country Country Country Country Country Country S. Centification of Status Desired Post Angulard of Present Address of New Registrated Agant Name CARPENTER, JOHN A650 US ONE GRANT, FL 32905 Street Address (P.O. Box Humber is Not Acceptable) Street Address (P.O. Box Humber is Not Acceptable in | 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | |
| Zip Country Zip Country | Suite. Apt. #, etc. | | Suite, Apt. #, etc. | | 04152007 | Chg-P | CR2E034 (12/06) | |
| S. Certificate of Status Desired Fair Required Fair Requir | City & State | | City & State | | | | <u> </u> | · · · · · · · · · · · · · · · · · · · |
| Street Address (P.O. Box Number is Not Acceptable) | Zip | Country | Zip | Country | 5. Certificate | of Status Desired | | |
| STREET ADDRESS OF STREET ADDRESS AND STREET ADDRESS AND A | | 6. Name and Address of Curren | Registered Agent | | 7. Name and | Address of New | Registered Agent | |
| SIGNATURE Signature Signa | 4550 US ONE | | | | | | | |
| 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or registere | GRAIVI, P | L 32905 | Ş. | | 5 6 | 1 - 0 | 1-600 | |
| 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE | | | t | City 1/0 | | | FL Zig Cox | ie ko |
| After May 1, 2007 Fee will be \$550.00 POPECATION OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE POPECATION OF THE POPE | | | or the purpose of changing its r | | | | Florida. I am familiar with | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT IT TITLE AARAS, KRISTIN L ARREA AORESS CITY-ST-2P AARAS, KRISTIN L ARREA AORESS CITY-ST-2P AARAS, KRISTIN L AARAS | SIGNATURE | | | | | | | , |
| After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. | | Signature, typed or printed name of registered agen | and title ii applicable. (NO1E: | Hegisleren Agent signature rei | quired when reinstalling) | - <u>-</u> - | UAIE | |
| TITLE AARAAS, KRISTIN L. STREET ADDRESS STREET ADDRESS CITY-ST-2IP TITLE CARPENTER, FOREST A STREET ADDRESS CITY-ST-2IP TITLE NAME CARPENTER, FOREST A STREET ADDRESS CITY-ST-2IP TITLE NAME CARPENTER, JOHN STREET ADDRESS CITY-ST-2IP TITLE NAME CARPENTER, JOHN STREET ADDRESS CITY-ST-2IP TITLE NAME CARPENTER, JOHN STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP Delete TITLE NAME STREET ADDRESS CITY-ST-2IP Delete STREET ADDRESS CITY-ST-2IP Delete STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP Delete STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CI | | | تتاسيات ا | | \$5.00 May Be Added to Fees | | | |
| AARAAS, KRISTIN L SIREET ADDRESS CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP CITHE CARPENTER, FOREST A SIREET ADDRESS CITY-ST-ZIP CITY-ST-ZI | 10. | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP CHESTER, FOREST A Addition MAKE STREET ADDRESS CITY-ST-ZIP TITLE NAME CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 CITY-ST-ZIP PALM BAY, FL 32905 CITY-ST-ZIP CARPENTER, JOHN 6043 ISLAND HARBOR RD. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MICCO, FL 32976 CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CHANGE Addition Addition Addition Addition Addition Addition Addition AMAE STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP CHANGE STREET ADDRESS CITY-ST-ZIP Addition Addition Addition Addition AMAE STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MAME STRE | | OFFICERS AND | DIRECTORS | 11. | | CHANGES TO OF | FICERS AND DIRECTOR | RS IN 11 |
| CITY-ST-ZIP CHESTER, NH 03036 CITY-ST-ZIP TITLE NAME CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 TITLE NAME CITY-ST-ZIP TITLE NAME CARPENTER, JOHN 6043 ISLAND HARBOR RD. STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | PD | | | | CHANGES TO OF | | |
| NAME STREET ADDRESS CITY-ST-ZPP TITLE VP CARPENTER, JOHN SOURS ISLAND HARBOR RD. CITY-ST-ZPP STREET ADDRESS CITY-ST-ZPP TITLE VP NAME CARPENTER, JOHN STREET ADDRESS CITY-ST-ZPP TITLE VP NAME STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP TITLE TI | TITLE NAME | PD AARAAS, KRISTIN L | | TITLE NAME | | CHANGES TO OF | | |
| STREET ADDRESS CITY -ST-ZIP PALM BAY, FL 32905 TITLE NAME CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 CITY -ST-ZIP TITLE NAME CARPENTER, WILLIAM 3752 RENAULD PL. STREET ADDRESS CITY -ST-ZIP TITLE NAME STREET ADDRESS CITY -ST-ZIP Delete TITLE NAME STREET ADDRESS CITY -ST-ZIP | TITLE NAME STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD | | TITLE NAME STREET ADDRESS | | CHANGES TO OF | | |
| CITY-ST-ZIP TITLE VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SITRET ADDRESS CITY-ST-ZIP THE NAME CARPENTER, WILLIAM 3752 RENAULD PL. CITY-ST-ZIP TITLE NAME SIRET ADDRESS CITY-ST-ZIP MICCO, FL 32976 TITLE NAME SIRET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | CHANGES TO OF | ☐ Change | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP SEBASTIAN, FL 32958 TITLE NAME CARPENTER, WILLIAM STREET ADDRESS CITY-ST-ZIP CARPENTER, WILLIAM STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | CHANGES TO OF | ☐ Change | Addition |
| STREET ADDRESS CITY-ST-ZIP SEBASTIAN, FL 32958 TITLE VP CARPENTER, WILLIAM STREET ADDRESS CITY-ST-ZIP MICCO, FL 32976 TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | CHANGES TO OF | ☐ Change | Addition |
| TITLE VP CARPENTER, WILLIAM 3752 RENAULD PL. STREET ADDRESS CITY-ST-ZIP MICCO, FL 32976 TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP | □ Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | CHANGES TO OF | ☐ Change | ☐ Addition |
| TITLE VP CARPENTER, WILLIAM 3752 RENAULD PL. STREET ADDRESS CITY-ST-ZIP MICCO, FL 32976 TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN | □ Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | ADDITIONS/ | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. | □ Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | ADDITIONS/ | | ☐ Change | Addition Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP | Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | 5 Seq 1 | jorse La | ☐ Change ☐ Change ☐ Change ☐ Change ☐ Change | Addition Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM | Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | 5 Seq 1 | jorse La | ☐ Change ☐ Change ☐ Change ☐ Change ☐ Change | Addition Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP TITLE CHANGE CITY-ST-ZIP CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | 5 Seq 1 | jorse La | ☐ Change ☐ Change ☐ Change ☐ Change ☐ Change | Addition Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP | 5 Seq 1 | jorse La | Change C | Addition Addition Addition |
| NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME .TITLE NAME .TITLE NAME .TITLE NAME | 5 Seq 1 | jorse La | Change C | Addition Addition Addition |
| STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | 5 Seq 1 | jorse La | Change C | Addition Addition Addition |
| CITY-ST-ZIP CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | 5 Seq 1 | jorse La | Change Change Change F1 32 965 Change Change Change | Addition Addition Addition Addition |
| 19 Description and its that the information of policy with this filling does not write for the control of the | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | 5 Seq 1 | jorse La | Change Change Change F1 32 965 Change Change Change | Addition Addition Addition Addition |
| 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. | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | PD AARAAS, KRISTIN L 79 NORTH POND ROAD CHESTER, NH 03036 CT CARPENTER, FOREST A 4550 US 1 (GRANT) PALM BAY, FL 32905 VP CARPENTER, JOHN 6043 ISLAND HARBOR RD. SEBASTIAN, FL 32958 VP CARPENTER, WILLIAM 3752 RENAULD PL. | Delete Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME .STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | 5 Seq 1 | jorse La | Change Change Change F1 32 965 Change Change Change | Addition Addition Addition Addition |

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 all other like empowered.

SIGNATURE: William Carry Ly

SIGNATURE AND TYPED OF PRINTED NAME OF STORING OFFICER OF DIRECTOR

321-952-1303

Daytime Phone #

4/17/07