## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F95000002550

**Current Principal Place of Business:** 

Entity Name: QUALITY ENTERPRISES USA, INC.

FILED Sep 26, 2008 Secretary of State

3894 MANNIX DRIVE STE 216 NAPLES, FL 341145406 US

**New Mailing Address: Current Mailing Address:** 

3894 MANNIX DRIVE STE 216 NAPLES, FL 341145406 US

FEI Number: 54-0947002 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MURRELL, HOWARD J 2827 SILVÉRLEAF LANE NAPLES, FL 34105

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

**New Principal Place of Business:** 

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete () Change () Addition Name: MURRELL, HOWARD J JR. Name: 3894 MANNIX DRIVE STE 216 Address: Address: City-St-Zip: NAPLES, FL 341145406 City-St-Zip: Title: VPD Title: () Delete () Change () Addition MURRELL, JOHN Name: Name: 208 TINTERN COURT Address: Address: CHESAPEAKE, VA 23320 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition

MURRELL, STACEY Name: Name: 3894 MANNIX DRIVE STE 216 Address: Address:

City-St-Zip: NAPLES, FL 341145406 City-St-Zip:

Title: VΡ () Delete Title: () Change () Addition

MORIARTY, PAUL Name: Name: Address: 3894 MANNIX DRIVE STE 216 Address: City-St-Zip: NAPLES, FL 341145406 US City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition

SLICKO, RICHARD Name: Name: SLICKO, RICHARD 3894 MANNIX DRIVE STE 216 Address: 3894 MANNIX DRIVE STE 216 Address:

City-St-Zip: NAPLES, FL 341145406 City-St-Zip: NAPLES, FL 341145406

Title: () Delete Title: ( ) Change (X) Addition

GAUDIO, LOÙIS Name: Name: 3894 MANNIX DRIVE STE 216 Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 341145406

I hereby certify that the information supplied with this filing does not qualify 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: HOWARD J MURRELL JR PD 09/26/2008