

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002550

FILED
Jan 14, 2009
Secretary of State

Entity Name: QUALITY ENTERPRISES USA, INC.

Current Principal Place of Business:

3894 MANNIX DRIVE
STE 216
NAPLES, FL 341145406 US

New Principal Place of Business:

Current Mailing Address:

3894 MANNIX DRIVE
STE 216
NAPLES, FL 341145406 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MURRELL, HOWARD J
2827 SILVERLEAF LANE
NAPLES, FL 34105 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: MURRELL, HOWARD J JR.
Address: 3894 MANNIX DRIVE STE 216
City-St-Zip: NAPLES, FL 341145406

Title: VPD () Delete
Name: MURRELL, JOHN
Address: 208 TINTERN COURT
City-St-Zip: CHESAPEAKE, VA 23320

Title: ST () Delete
Name: MURRELL, STACEY
Address: 3894 MANNIX DRIVE STE 216
City-St-Zip: NAPLES, FL 341145406

Title: VP () Delete
Name: MORIARTY, PAUL
Address: 3894 MANNIX DRIVE STE 216
City-St-Zip: NAPLES, FL 341145406 US

Title: VP () Delete
Name: SLICKO, RICHARD
Address: 3894 MANNIX DRIVE STE 216
City-St-Zip: NAPLES, FL 341145406

Title: VP () Delete
Name: GAUDIO, LOUIS
Address: 3894 MANNIX DRIVE STE 216
City-St-Zip: NAPLES, FL 341145406

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
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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 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

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date