2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H67736

FILED Apr 29, 2004 Secretary of State

Entity Nar	me: QUALITY	ADJUSTMENTS, INC.			
Current P	rincipal Place	e of Business:	New Principal Pla	New Principal Place of Business:	
101 AVE.C P.O.BOX 1 WINTER H		8882	P.O.BOX 151	950 1ST ST. S #204 P.O.BOX 151 WINTER HAVEN, FL 33882	
Current M	lailing Addre	ss:	New Mailing Add	New Mailing Address:	
P.O.BOX 1 WINTER H	151 HAVEN, FL 33	882			
FEI Number:	: 59-2551559	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Addres	s of New Registered Agent:	
	NDA IANDO DR. HAVEN, FL 33	8884		EIRICH, LINDA 274 HERNANDO RD. WINTER HAVEN, FL 33884	
	named entity of Florida.	submits this statement for the	purpose of changing its regist	ered office or registered agent, or both,	
SIGNATUR	RE:			04/29/2004	
	Electro	nic Signature of Registered A	gent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	EIRICH, LINDA 274 HERNAND		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	EIRICH, CHRÌS 274 HERNAND		Title: Name: Address: Citv-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LINDA EIRICH **CST** 04/29/2004