

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H67736

FILED
Apr 28, 2005
Secretary of State

Entity Name: QUALITY ADJUSTMENTS, INC.

Current Principal Place of Business:

950 1ST ST. S #204
P.O.BOX 151
WINTER HAVEN, FL 33882

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 151
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 59-2551559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIRICH, LINDA
274 HERNANDO RD.
WINTER HAVEN, FL 33884 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: CST () Delete
Name: EIRICH, LINDA,
Address: 274 HERNANDO RD
City-St-Zip: WINTER HAVEN, FL 338841026

Title: P () Delete
Name: EIRICH, CHRISTOPHER,
Address: 274 HERNANDO RD
City-St-Zip: WINTER HAVEN, FL 338841026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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

C

04/28/2005

Electronic Signature of Signing Officer or Director

Date