

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85367

FILED
Mar 01, 2005
Secretary of State

Entity Name: QUALITY APPLIANCE SERVICE OF PINELLAS, INC.

Current Principal Place of Business:

1155 NE CLEVELAND ST
CLEARWATER, FL 33755 US

New Principal Place of Business:

Current Mailing Address:

1155 NE CLEVELAND ST
CLEARWATER, FL 33755 US

New Mailing Address:

FEI Number: 59-2600106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SYMANSKI & MCKNIGHT, CPA'S PA
1301 SEMINOLE BLVD, STE 115
LARGO, FL 33770 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: ALONSO, PETER,
Address: 9316 120TH AVE. NORTH
City-St-Zip: LARGO, FL 34643

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALONSO, PETER,
Address: 9986 LAKE SEMINOLE DRIVE W.
City-St-Zip: LARGO, FL 33773

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: EMMANUEL PETER ALONSO

PD

03/01/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date