2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# L02000014569

Entity Name: QUALITY SERVICE PROVIDERS LLC

Current Principal Place of Business:

4747 WEST WATERS AVE
905
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4747 WEST WATERS AVE
905
TAMPA, FL 33614

New Mailing Address:

FEI Number: 04-3685990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KING, PERCY
4747 WEST WATERS AVE
905
TAMPA, FL 33614 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: KING, PERCY
Address: 4747 WEST WATERS AVE#905
City-St-Zip: TAMPA, FL 33614

Title: MGRM ( ) Delete
Name: DOLLAR, CLIFFORD
Address: 1918 WOOD TERRENCE RIDGE
City-St-Zip: DORAVILLE, GA 30340

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PERCY KING MGRM 09/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date