

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031647

FILED
Mar 01, 2008
Secretary of State

Entity Name: JR QUALITY SERVICES, LLC

Current Principal Place of Business:

9860 JAMAICA DRIVE
MIAMI, FL 33189 US

New Principal Place of Business:

2294 PEACH DRIVE
JACKSONVILLE, FL 322146 US

Current Mailing Address:

9860 JAMAICA DRIVE
MIAMI, FL 33189 US

New Mailing Address:

2294 PEACH DRIVE
JACKSONVILLE, FL 322146 US

FEI Number: 20-1129415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RINE, JONATHAN C
9860 JAMAICA DRIVE
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

RINE, JONATHAN C
2294 PEACH DRIVE
JACKSONVILLE, FL 32246 US

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: JONATHAN RINE

03/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RINE, JONATHAN C
Address: 9860 JAMAICA DRIVE
City-St-Zip: MIAMI, FL 33189 US

Title: MGRM () Delete
Name: UBILLA, ELIZABETH
Address: 9860 JAMAICA DRIVE
City-St-Zip: MIAMI, FL 33189 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RINE, JONATHAN C
Address: 2294 PEACH DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGRM (X) Change () Addition
Name: UBILLA, ELIZABETH
Address: 2294 PEACH DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

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: JONATHAN RINE

MGR

03/01/2008

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