

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065384

FILED
Jan 08, 2008
Secretary of State

Entity Name: QUALITY MEDICAL RENTALS, LLC

Current Principal Place of Business:

7411 114TH AVE. N., SUITE 308
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

7411 114TH AVE. N., SUITE 308
LARGO, FL 33773

New Mailing Address:

FEI Number: 20-1582062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERFETTO, DONALD J
6001 KESTREL POINT AVE.
LITHIA, FL 33547 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: MGR () Delete
Name: PERFETTO, DONALD
Address: 6001 KESTREL POINT AVE.
City-St-Zip: LITHIA, FL 33547

Title: MGR () Delete
Name: MCMAHON, JOHN
Address: 402 HIDDEN HARBOR DRIVE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: DONALD PERFETTO

MGR

01/08/2008

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