

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005361

Entity Name: QUEST SYSTEMS, L.L.C.

FILED
Jun 09, 2004
Secretary of State

Current Principal Place of Business:

8549 OLD CR 54
NEWPORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

8549 OLD CR 54
NEWPORT RICHEY, FL 34653

New Mailing Address:

14908 N OLA AVE
TAMPA, FL 33613

FEI Number: 59-3595585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARDELL, MICHAEL W
14908 N OLA AVENUE
TAMPA, FL 33613 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/MEMBERS:

Title: MGR () Delete
Name: BARDELL, MICHAEL W
Address: 3536 SHADOWOOD DRIVE
City-St-Zip: VALRICO, FL 33594

Title: MGR () Delete
Name: ERFAN, SAID
Address: 4211 BENSON AVE.
City-St-Zip: ST. PETERSBURG, FL 33713

Title: MGR () Delete
Name: BARDELL, SHIRLEY
Address: 3536 SHADOWOOD DRIVE
City-St-Zip: VALRICO, FL 33594

Title: MGR () Delete
Name: CASSA, IRENE
Address: 14908 N OLA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: IRENE CASSA

MGR

06/09/2004

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