

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000058048

FILED
Jan 23, 2007
Secretary of State

Entity Name: QUALITY INSTRUMENTS, INC.

Current Principal Place of Business:

4315 EAST REGNAS AVENUE
UNIT B
TAMPA, FL 33617

New Principal Place of Business:

10571 HEARTH ROAD
SPRING HILL, FL 34608

Current Mailing Address:

4315 EAST REGNAS AVENUE
UNIT B
TAMPA, FL 33617

New Mailing Address:

10571 HEARTH ROAD
SPRING HILL, FL 34608

FEI Number: 59-3654065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOSTOUFI, FARZAD (FRANK)
4315 EAST REGNAS AVENUE
UNIT B
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

MOSTOUFI, FARZAD (FRANK)
10571 HEARTH ROAD
SPRING HILL, FL 34608 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:

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: MOSTOUFI, LORI
Address: 4315 EAST REGNAS AVENUE, UNIT B
City-St-Zip: TAMPA, FL 33617

Title: VT () Delete
Name: MOSTOUFI, FARZAD (FRANK)
Address: 4315 EAST REGNAS AVENUE, UNIT B
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: MOSTOUFI, FARZAD
Address: 10571 HEARTH ROAD
City-St-Zip: SPRING HILL, FL 34608

Title: VT (X) Change () Addition
Name: MOSTOUFI, LORI
Address: 10571 HEARTH ROAD
City-St-Zip: SPRING HILL, FL 34608

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FARZAD MOSTOUFI

PS

01/23/2007

Electronic Signature of Signing Officer or Director

Date