

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000018192

FILED  
Mar 07, 2007  
Secretary of State

Entity Name: QUALITY INFORMATION SERVICE INC.

## Current Principal Place of Business:

598 DREXEL AVE  
PALM BAY, FL 32905

## New Principal Place of Business:

598 DREXEL AVE  
PALM BAY, FL 32907

## Current Mailing Address:

598 DREXEL AVE N.E.  
PALM BAY, FL 32905

## New Mailing Address:

598 DREXEL AVE N.E.  
PALM BAY, FL 32907

FEI Number: 65-1107151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, JENNIFER  
598 DREXEL AVE N.E.  
PALM BAY, FL 32905 US

## Name and Address of New Registered Agent:

MITCHELL, JENNIFER  
598 DREXEL AVE N.E.  
PALM BAY, FL 32907 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:

03/07/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32905

Title: V ( ) Delete  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32905

Title: S ( ) Delete  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32905

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: V (X) Change ( ) Addition  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: S (X) Change ( ) Addition  
Name: MITCHELL, JENNIFER  
Address: 598 DREXEL AVE N.E.  
City-St-Zip: PALM BAY, FL 32907

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: JENNIFER MITCHELL

P

03/07/2007

Electronic Signature of Signing Officer or Director

Date