2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018362

Entity Name: W & R QUALITY SERVICES, CORP.

FILED Aug 29, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2875 PALM BCH BLVD #C-105 3609 3RD ROAD STREET SW FT MYERS, FL 33916 LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

2875 PALM BCH BLVD #C-105 3609 3RD ROAD STREET SW FT MYERS, FL 33916 LEHIGH ACRES, FL 33971

FEI Number: 20-0660810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAX HOUSE CORPORATION TAX HOUSE CORPORATION 1216 E SAMPLE RD 11601 S CLEVELAND SUITE - 6 POMPANO BCH, FL 33064 US FORT MYERS, FL 33907

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: 08/29/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete RIBEIRO, WESLEI ALVES Name: 2875 PALM BCH BLVD #C-105 Address:

City-St-Zip: FT MYERS, FL 33916

Title: DV (X) Delete PINTO, RONDECARLOS M

Name: 5655 10 AVE Address:

FT MYERS, FL 33907 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition RIBEIRO, WESLEI ALVES Name: Address: 3609 3RD ROAD STREET SW City-St-Zip: LEHIGH ACRES, FL 33971

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 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: WESLEI ALVES RIBEIRO PD 08/29/2005