

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026523

FILED  
Mar 05, 2008  
Secretary of State

Entity Name: QUALIFIED SYSTEMS CONTRACTING INC.

## Current Principal Place of Business:

13623 MORNING COURT  
BAYONET POINT, FL 34667

## New Principal Place of Business:

6708 BENJAMIN ROAD  
SUITE 100  
TAMPA, FL 33634

## Current Mailing Address:

PO BOX 5797  
HUDSON, FL 34674

## New Mailing Address:

6708 BENJAMIN ROAD  
SUITE 100  
TAMPA, FL 33634

FEI Number: 45-0535420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TORGERSON, DAVID C  
13623 MORNING COURT  
BAYONET POINT, FL 34667 US

## Name and Address of New Registered Agent:

TORGERSON, DAVID C  
6708 BENJAMIN ROAD  
SUITE 100  
TAMPA, FL 33634 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:

03/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TORGERSON, DAVID C  
Address: 13623 MORNING COURT  
City-St-Zip: BAYONET POINT, FL 34667

Title: S ( ) Delete  
Name: TORGERSON, PAULA A  
Address: 13623 MORNING COURT  
City-St-Zip: BAYONET POINT, FL 34667

Title: VP (X) Delete  
Name: CARL, STARK W  
Address: 3132 SAGO POINT COURT  
City-St-Zip: LAND O LAKES, FL 34639

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TORGERSON, DAVID C  
Address: 6708 BENJAMIN ROAD- SUITE 100  
City-St-Zip: TAMPA, FL 33634

Title: VP (X) Change ( ) Addition  
Name: STARK, CARL W  
Address: 6708 BENJAMIN ROAD- SUITE 100  
City-St-Zip: TAMPA, FL 33634

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 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: DAVID C. TORGERSON

P

03/05/2008

Electronic Signature of Signing Officer or Director

Date