

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000124710

**FILED**  
**Oct 08, 2005**  
**Secretary of State**

**Entity Name:** QUALITY MORTGAGE SOLUTIONS, INC

**Current Principal Place of Business:**

1951 SW 69TH AVE SUITE 104  
PEMBROKE PINES, FL 33023

**New Principal Place of Business:**

3600 S. STATE RD 7 (US 441)  
SUITE 363  
MIRAMAR, FL 33023

**Current Mailing Address:**

1951 SW 69TH AVE SUITE 104  
PEMBROKE PINES, FL 33023

**New Mailing Address:**

3600 S. STATE RD 7 ( US 441)  
SUITE 363  
MIRAMAR, FL 33023

**FEI Number:** 20-1570710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DARIUS, WADESON  
1951 SW 69TH AVE SUITE 104  
PEMBROKE PINES, FL 33023 US

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

DARIUS, WADESON  
3600 S. STATE RD 7 (US 441)  
SUITE 363  
MIRAMAR, FL 33023 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: WADESON DARIUS

10/08/2005

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: P ( ) Delete  
Name: DARIUS, WADESON  
Address: 1951 SW 69TH AVE SUITE 104  
City-St-Zip: PEMBROKE PINES, FL 33023

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DARIUS, WADESON  
Address: 3600 S. STATE RD 7(US 441)  
City-St-Zip: MIRAMAR, FL 33023

Title: VP ( ) Change (X) Addition  
Name: DARIUS, JAMAL T  
Address: 3600 S. STATE RD 7 ( US 441)  
City-St-Zip: MIRAMAR, FL 33023

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: WADESON DARIUS

P

10/08/2005

Electronic Signature of Signing Officer or Director

Date