

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135013

FILED  
Mar 16, 2011  
Secretary of State

Entity Name: QUALITY SOURCING SOLUTIONS, INC.

**Current Principal Place of Business:**

4213 FALLWOOD CIRCLE  
ORLANDO, FL 32812

**New Principal Place of Business:**

**Current Mailing Address:**

4213 FALLWOOD CIRCLE  
ORLANDO, FL 32812

**New Mailing Address:**

FEI Number: 14-1915656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

STUART, E A  
4213 FALLWOOD CIRCLE  
ORLANDO, FL 32812 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: STUART, EDWARD A  
Address: 4213 FALLWOOD CIRCLE  
City-St-Zip: ORLANDO, FL 32812

Title: V  
Name: STUART, ELIZABETH A  
Address: 4213 FALLWOOD CIRCLE  
City-St-Zip: ORLANDO, FL 32812

Title: D  
Name: FINGER, CRAIG  
Address: 822 PORTAGE TRAIL  
City-St-Zip: CUYAHOGA FALLS, OH 44221

Title: D  
Name: STUART, THOMAS A  
Address: 423 BOLTON ROAD  
City-St-Zip: HIGHTSTOWN, NJ 08520

I hereby 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 all other like empowered.

SIGNATURE: EDWARD A STUART

P

03/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date