

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000157557

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA QUALITY COMPONENTS, INC.

**Current Principal Place of Business:**

3406 MADISON ST.  
HOLIDAY, FL 34690

**New Principal Place of Business:**

**Current Mailing Address:**

3406 MADISON ST.  
HOLIDAY, FL 34690

**New Mailing Address:**

**FEI Number:** 20-1906639

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GEHRIG, CRAIG  
3406 MADISON ST  
HOLIDAY, FL 34690 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: PSD  
Name: GEHRIG, CRAIG  
Address: 3406 MADISON ST  
City-St-Zip: HOLIDAY, FL 34690

Title: VTD  
Name: JACUSIS, RON  
Address: 3406 MADISON ST  
City-St-Zip: HOLIDAY, FL 34690

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: CRAIG GEHRIG

PSD

04/20/2011

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

\_\_\_\_\_  
Date