

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108813

FILED
Mar 25, 2009
Secretary of State

Entity Name: QUALITY INSURANCE GROUP, INC.

Current Principal Place of Business:

825A SOUTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

825A SOUTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 20-3266584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

KATHLEEN ISOLDI
825-A SOUTH FEDERAL HWY
DEERFIELD BEACH, FL 33441 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: KATHLEEN ISOLDI

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ISOLDI, KATHLEEN M
Address: 2929 E. COMMERCIAL BLVD., SUITE PHAA
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: S () Delete
Name: AMODEO, JOHN FRANK
Address: 2929 E. COMMERCIAL BLVD., SUITE PHAA
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: P () Delete
Name: LOY, DAVID
Address: 2929 E. COMMERCIAL BLVD., SUITE PHAA
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: T () Delete
Name: SMIGIEL, JOHN
Address: 2929 E. COMMERCIAL BLVD., SUITE PHAA
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ISOLDI, KATHLEEN M
Address: 825-A SOUTH FEDERAL HWY
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: S (X) Change () Addition
Name: AMODEO, JOHN FRANK
Address: 825-A SOUTH FEDERAL HWY
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: P (X) Change () Addition
Name: LOY, DAVID
Address: 825-A SOUTH FEDERAL HWY
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: T (X) Change () Addition
Name: SMIGIEL, JOHN
Address: 825-A SOUTH FEDERAL HWY
City-St-Zip: DEERFIELD BEACH, FL 33441

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: KATHLEEN ISOLDI

PRES

03/25/2009

Electronic Signature of Signing Officer or Director

Date