

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000063048

FILED
Oct 15, 2007
Secretary of State

Entity Name: QUALITY HOME RESPIRATORY SERVICES, INC

Current Principal Place of Business:

3599 UNIVERSITY BLVD. SOUTH
#903
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3599 UNIVERSITY BLVD. SOUTH
#903
JACKSONVILLE, FL 32216

New Mailing Address:

7362 GINGER TEA TRAIL SOUTH
JACKSONVILLE, FL 32244

FEI Number: 22-3930511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOVER, GREGORY B
7362 GINGER TEA TRAIL SOUTH
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

GLOVER, GREGORY B
7362 GINGER TEA TRAIL SOUTH
JACKSONVILLE, FL 32244 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: GREGORY B GLOVER

10/15/2007

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: D () Delete
Name: GLOVER, GREGORY B
Address: 7362 GINGER TEA TRAIL SOUTH
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GLOVER, GREGORY B
Address: 7362 GINGER TEA TRAIL SOUTH
City-St-Zip: JACKSONVILLE, FL 32244

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: GREGORY B GLOVER

PRES

10/15/2007

Electronic Signature of Signing Officer or Director

Date