2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07828

Entity Name: QUALITY CARRIERS, INC

FILED Apr 13, 2007 Secretary of State

Entity Name: QUALITY CARRIERS, INC.						
Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
3802 CORF TAMPA, FL	POREX PARK D . 33619 US	DRIVE				
Current Mailing Address:			New Maili	New Mailing Address:		
3802 CORPOREX PARK DRIVE TAMPA, FL 33619 US			ATTN: JAN	3802 CORPOREX PARK DRIVE ATTN: JANEY HENDERSON TAMPA, FL 33619 US		
FEI Number: 36-2590063		FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Addres					ew Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:						
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().					Date	
		,	48815164	0/01/41/050		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () D DETHER, GERAL 3802 CORPORAT TAMPA, FL 3361	E PARK DR	Title: Name: Address: City-St-Zip:	CEO (X) DETHER, GERA 3802 CORPORE TAMPA, FL 336	EX PARK DRIVE	
Title: Name: Address: City-St-Zip:	S () D MILLSTONE, ROE 3802 CORPOREX TAMPA, FL 3361	CPARTE DR	Title: Name: Address: City-St-Zip:	S (X) GOLD, JONATH, 3802 CORPORE TAMPA, FL 336	EX PARK DRIVE	
Title: Name: Address: City-St-Zip:	T () D RAGE, TIMOTHY 3802 CORPOREX TAMPA, FL 3361		Title: Name: Address: City-St-Zip:	T (X) PAGE, TIMOTHY 3802 CORPORE TAMPA, FL 336	EX PARK DRIVE	
Title: Name: Address: City-St-Zip:	() D	elete	Title: Name: Address: City-St-Zip:	COO () ENZOR, GARY I 3802 CORPORE TAMPA, FL 336	EX PARK DRIVE	
Title: Name: Address: City-St-Zip:	() D	velete	Title: Name: Address: City-St-Zip:	SVP () COPELAND, DE 3802 CORPORE TAMPA, FL 336	EX PARK DRIVE	

I hereby certify that the information supplied with this filing does not qualify for the 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: JANEY HENDERSON, CORPORATE PARALEGAL CP 04/13/2007