

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000090278

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** QUALITY ELECTRONIC COMPONENTS INC.

**Current Principal Place of Business:**

1634 SE 47TH ST  
15  
CAPE CORAL, FL 33904

**Current Mailing Address:**

PO BOX 100687  
CAPE CORAL, FL 33910

**New Principal Place of Business:**

1634 SE 47TH ST  
15  
CAPE CORAL, FL 33904 UN

**New Mailing Address:**

PO BOX 100687  
CAPE CORAL, FL 33910 UN

**FEI Number:** 26-3515999

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZORTMAN, JAYSON T  
1634 SE 47TH ST  
CAPE CORAL, FL 33904 US

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

ZORTMAN, JAYSON T SR  
1634 SE 47TH ST  
UNIT 15  
CAPE CORAL, FL 33904 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:** JAYSON T ZORTMAN SR

02/23/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P, D  
**Name:** ZORTMAN, JAYSON T SR  
**Address:** 1634 S.E. 47TH ST., UNIT 15  
**City-St-Zip:** CAPE CORAL, FL 33904 US

**Title:** S, T  
**Name:** ZORTMAN, JAYSON T SR  
**Address:** 1634 S.E. 47TH ST., UNIT 15  
**City-St-Zip:** CAPE CORAL, FL 33904 US

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:** JAYSON T ZORTMAN SR

P,D

02/23/2011

Electronic Signature of Signing Officer or Director

Date