

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000111114

Entity Name: QUALITY TRIM PLUS, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

5308 FARGO CT.  
GULF BREEZE, FL 32563

## New Principal Place of Business:

5308 FARGO CT.  
GULF BREEZE, FL 32563 US

## Current Mailing Address:

5308 FARGO CT.  
GULF BREEZE, FL 32563

## New Mailing Address:

5308 FARGO CT.  
GULF BREEZE, FL 32563 US

FEI Number: 26-3918208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAYES, HEIDI  
5308 FARGO CT.  
GULF BREEZE, FL 32563 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MAYES, HEIDI  
Address: 5308 FARGO CT.  
City-St-Zip: GULF BREEZE, FL 32563

Title: V ( ) Delete  
Name: MAYES, JOHN  
Address: 5308 FARGO CT.  
City-St-Zip: GULF BREEZE, FL 32563

Title: ST ( ) Delete  
Name: BROWN, DAVID  
Address: 5308 FARGO CT.  
City-St-Zip: GULF BREEZE, FL 32563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: MAYES, HEIDI  
Address: 5308 FARGO CT.  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: V (X) Change ( ) Addition  
Name: MAYES, JOHN  
Address: 5308 FARGO CT.  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: S (X) Change ( ) Addition  
Name: BROWN, DAVID  
Address: 5344 BARBAROSA RD  
City-St-Zip: GULF BREEZE, FL 32563 US

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: HEIDI MAYES

PT

04/23/2009

Electronic Signature of Signing Officer or Director

Date