

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000009507

FILED  
Jan 19, 2012  
Secretary of State

**Entity Name:** QUALITY BUILT TRANSMISSION OF SOUTH FLORIDA INC

**Current Principal Place of Business:**

159 N.W. 1ST STREET  
BAY #2  
DEERFIELD BEACH, FL 33441 US

**New Principal Place of Business:**

**Current Mailing Address:**

159 N.W. 1ST STREET  
BAY #2  
DEERFIELD BEACH, FL 33441 US

**New Mailing Address:**

**FEI Number:** 27-4714939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKE, ERIC  
159 N.W. 1ST STREET  
BAY #2  
DEERFIELD BEACH, FL 33441 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

**OFFICERS AND DIRECTORS:**

Title: P,VP  
Name: FRANKE, ERIC  
Address: 159 N.W. 1ST STREET BAY#2  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: SEC  
Name: FRAKE, ERIC  
Address: 159 N.W. 1ST STREET BAY #2  
City-St-Zip: DEERFIELD BEACH, FL 33441 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: ERIC FRANKE

P

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date