2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P94000001530

J & R QUALITY BUILDERS, INC.



Principal Place of Business

2520 EL RANCHO DR LEESBURG, FL 34748 Mailing Address

2520 EL RANCHO DR LEESBURG, FL 34748

FILED Mar 28, 2006 8:00 am Secretary of State

03-28-2006 90131 050 ***150.00

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DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 03012006 No Chg-P Applied For 4. FEI Number Not Applicable 59-3217192

5. Certificate of Status Desired

\$8.75 Additional Fee Required

325)

6. Name and Address of Current Registered Agent

CLIFTON, RONALD D 2520 EL RANCHO DR. LEESBURG, FL 34748

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent, or both, in the State of Florida. I am familiar with, and accept the office of registered agent agen					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees					CALE /
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLIFTON, RONALD D 2520 EL RANCHO DR. LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attactiment with an address, with all other like empowered.					