2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P95000052986



FILED Jan 09, 2003 8:00 am Secretary of State

1. Enlity Name QRC, INC.						01-09-2003 90036 023 ***150.00		
Principal Place of Business 2326 SOFIA DR LUTZ FL 33549			Mailing Address 2326 SOFIA DR LUTZ FL 33549			I JERNESI NE JEME RUM GEMA ERMI ERMI	Adiri dino kota idia	1 Fâliă a lia 1 00 ;
2. Principal	Place of Busin	ess	3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State			City & State			4. FEI Number 59-3330443 Applied For Not Applicable		
Zip			Zip	Country –		5. Certificate of Status Desired	¢0.75 .	Iditional
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
WATSON, KEITH					Name .			
2326 SOFIA DR LUTZ FL 33549				Stree	reet Address (P.O. Box Number is Not Acceptable)			
	00048			City			Zip Coo	de
8. The above the obliga	e named entity ations of registe	submits this statement to	r the purpose of changing its	registered office	or registered	d agent, or both, in the State of Florida.		
SIGNATURE		r printed name of registered agent						
Afte Make Chec	FILE NOW!!! er May 1, 200	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	State	E: Registered Agent sig	mature required w	9. Election Campaign Financing Trust Fund Contribution.		00 May Be
10. %	TB	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATSON, 1 2326 SOFIA LUTZ FL 33	N DR 1549 🗠	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s 240Z	30N, KEITH - SOFIA OK. 2, FL 33558	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATSON, P 2326 SOFIA LUTZ FL		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT WATSON, K 2326 SOFIA LUTZ FL 33	DR	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	S		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD ROSSLER, I 13413 LITEV HUDSON FL	vood dr.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		CER, FRED PLITOWOOD DR. SOW, FL 34669	Change	☐ Addition
TITLE Name Street address City-St-Zip	D Dowdy, Ka 18201 Wali Lutz Fl 33	(EN RD	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	PROVER	ZANO, MATT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5813	D NEANO, MATT WAR ADMIRAL DR. UM CHAPOL, FL 3354	☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 9.07(3)(i), 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

SIGNATURE:

NECKETHOWATSON JR