

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000037016

FILED
Sep 03, 2008
Secretary of State

Entity Name: QUALITY EQUIPMENT & TOOL RENTAL, INC.

Current Principal Place of Business:

8060 BELVEDER RD., SUITE 5
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

117 LEXINGTON DR
ROYAL PALM BEACH, FL 334118206 US

New Mailing Address:

FEI Number: 65-0674657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETTERIDGE, TERENCE A
117 LEXINGTON DRIVE
ROYAL PALM BEACH, FL 334118206 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BETTERIDGE, TERENCE A
Address: 117 LEXINGTON DR
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VPD () Delete
Name: BETTERIDGE, PAUL
Address: 117LEXINGTON DR
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: SECD () Delete
Name: LIVIGNE, GARY
Address: 8060 BELVEDERE ROAD STE 5
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TERENCE BETTERIDGE

PD

09/03/2008

Electronic Signature of Signing Officer or Director

_____ Date