


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2007 08:00 A
Secretary of State

DOCUMENT # P99000007020	
1. Entity Name QUALITY PAINTING & MORE, INC.	

Principal Place of Business 13132 60 TH ST. N. WEST PALM BEACH, FL 33411	Mailing Address 13132 60 TH ST. N. WEST PALM BEACH, FL 33411
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DO NOT WRITE IN THIS SPACE



05162007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0890948	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KURTISHI, JEMAL
13132 60TH ST. N.
WEST PALM BEACH, FL 33411

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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 obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV KURTISHI, JEMAL 13132 60TH ST. N. WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M KURTISHI, ELVIRA 13132 60TH ST N. WEST PALM BEACH, FL 33411
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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 attachment with an address, with all other like empowered.

SIGNATURE: *Sam Hunter* S/

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #