

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108813

Entity Name: QUALITY INSURANCE GROUP, INC.

Current Principal Place of Business:

900 SE 8TH AVE
DEERFIELD BEACH, FL 33441

Current Mailing Address:

900 SE 8TH AVE
DEERFIELD BEACH, FL 33441 US

FEI Number: 20-3266584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KATHLEEN ISOLDI
900 SE 8TH AVE
DEERFIELD BEACH, FL 33441 US

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

Officer/Director Detail :

Title PD
Name ISOLDI, KATHLEEN M
Address 900 SE 8TH AVE
City-State-Zip: DEERFIELD BEACH FL 33441

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: KATHLEEN ISOLDI

PRESIDENT

04/21/2015

Electronic Signature of Signing Officer/Director Detail

Date