

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90009 041 ***550.00

DOCUMENT # P02000115558 1. Entity Name GLOBAL NURSING REGISTRY, INC.					
Principal Place of Business 1250 E HALLANDALE BCH BLVD HALLANDALE BCH, FL 33009			Mailing Address 1250 E HALLANDALE BCH BLVD HALLANDALE BCH, FL 33009		
2. Principal Place of Business 17011 Beach Blvd.		3. Mailing Address <i>[Signature]</i>			
Suite, Apt. #, etc. Ste. 900		Suite, Apt. #, etc. <i>[Signature]</i>			
City & State Huntington Beach CA		City & State <i>[Signature]</i>		4. FEI Number 45-0489501	
Zip 92647		Country USA		Zip <i>[Signature]</i>	
Country USA		Zip <i>[Signature]</i>		Country <i>[Signature]</i>	
6. Name and Address of Current Registered Agent FILINGS, INC. 3732 NW 16TH ST FT LAUDERDALE, FL 33311			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EZEKIEL, VIVIAN 1250 E HALLANDALE BCH BLVD HALLANDALE BCH, FL 33009	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.T. S Maxine Zeleznick 727 Yorktown #126 Huntington Beach, CA 92648	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EZEKIEL, MICHAEL 1250 E HALLANDALE BCH BLVD HALLANDALE BCH, FL 33009	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y.C Greg Young 727 Yorktown #126 Huntington Beach CA 92648	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAZ, FERNANDO D 1250 E HALLANDALE BCH BLVD HALLANDALE BCH, FL 33009	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.M Mayra Iraheta 1420 La Mirada Victorville, CA 92392	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Mayra Iraheta		
Date: 8/26/04			Daytime Phone #: (714) 375-6608		