

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138979

FILED
Mar 10, 2007
Secretary of State

Entity Name: EMPLOYEE LEASING STRATEGIES, INC.

Current Principal Place of Business:

301 WEST ATLANTIC AVE.
SUITE L-6
DELRAY BEACH, FL 33444

New Principal Place of Business:

80 NE 5TH AVENUE
DELRAY BEACH, FL 33483

Current Mailing Address:

301 WEST ATLANTIC AVE.
SUITE L-6
DELRAY BEACH, FL 33444

New Mailing Address:

80 NE 5TH AVENUE
DELRAY BEACH, FL 33483

FEI Number: 20-5870208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTER H. MESSICK, P.A.
1900 CORPORATE BLVD.
SUITE 305 WEST
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTS () Delete
Name: WORLEY, BRAD W
Address: 301 WEST ATLANTIC AVE., SUITE L-6
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: WORLEY, BRAD W
Address: 80 NE 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the 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: BRAD WORLEY

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03/10/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date