

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000059215

FILED
Apr 13, 2012
Secretary of State

Entity Name: COMPREHENSIVE NURSING SERVICES, INC.

Current Principal Place of Business:

670 NE 160 TER
MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

670 NE 160 TER
MIAMI, FL 33162

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURENT, WILBERT
670 NE 160 TER
MIAMI, FL 33162 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

OFFICERS AND DIRECTORS:

Title: P
Name: LAUARENT, MARIE M
Address: 670 NE 160 TER
City-St-Zip: MIAMI, FL 33162

Title: D
Name: LAURENT, WILBERT
Address: 670 NE 160 TER
City-St-Zip: MIAMI, FL 33162

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: WILBERT LAURENT

D

04/13/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date