2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2005
Secretary of State

DOCUMENT# G31289

Entity Name: UNEMPLOYMENT SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

4950 SW 72 AVE
STE 108
MIAMI, FL 33155 US

New Principal Place of Business:

6356 MANOR LANE
SUITE 103
SOUTH MIAMI, FL 33143 US

Current Mailing Address:

PO BOX 558247
MIAMI, FL 332558247 US

New Mailing Address:

FEI Number: 59-2281855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARROLL, LOURDES F
4950 SW 72 AVE
STE 108
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

CARROLL, LOURDES F
6356 MANOR LANE
SUITE 103
SOUTH MIAMI, FL 33143 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: LOURDES F. CARROLL 02/18/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CARROLL, LOURDES F
Address: 4950 SW 72ND AVE #108
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Delete
Name: JAEN, NOELLE C
Address: 4950 SW 72ND AVE, #108
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CARROLL, LOURDES F
Address: 6356 MANOR LANE, SUITE 103
City-St-Zip: SOUTH MIAMI, FL 33143

Title: VP (X) Change ( ) Addition
Name: JAEN, NOELLE C
Address: 6356 MANOR LANE, SUITE 103
City-St-Zip: SOUTH MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NOELLE JAEN VP 02/18/2005
Electronic Signature of Signing Officer or Director Date