

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51290

FILED
May 01, 2008
Secretary of State

Entity Name: STAT NURSING SERVICES INTERNATIONAL INC.

Current Principal Place of Business:

6282 DENNY LANE
MABLETON, GA 30126 US

New Principal Place of Business:

Current Mailing Address:

603 CRACKER BARREL RD
QUINCY, FL 32351 US

New Mailing Address:

FEI Number: 59-2917453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEIGEL, LAWRENCE J.
343 ALMERIA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SPEIGEL, LAWRENCE J.
1840 CORAL WAY
MIAMI, FL 33145 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: LAWRENCE J SPIEGEL, PRESIDENT 05/01/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: OCEO () Delete
Name: SIMMONS, DAYMON B
Address: 6282 DENNY LANE
City-St-Zip: ATLANTA, GA 30126

Title: VP () Delete
Name: UNDERWOOD, RENEE
Address: 177 WARWICK STREET
City-St-Zip: DALY CITY, CA

Title: COO () Delete
Name: JOHNSON, LEON
Address: 603 CRACKER BARREL ROAD
City-St-Zip: QUINCY, FL 32351

Title: AVP () Delete
Name: BOBB, JAMES C
Address: 572 SENECA STREET
City-St-Zip: MERCED, CA 95340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LEON JOHNSON COO 05/01/2008
Electronic Signature of Signing Officer or Director Date