

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009220

FILED
Apr 18, 2009
Secretary of State

Entity Name: AMERICAN NURSES AGENCY, LLC

Current Principal Place of Business:

123 SE THIRD AVE
SUITE 397
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

123 SE THIRD AVE
SUITE 397
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORDERO & ASSOCIATES, P.A.
200 S. BISCAYNE BLVD.
SUITE #4650
MIAMI, FL 33131 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PACHECO, JOSE
Address: 123 SE THIRD AVE, SUITE #397
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSE PACHECO MGR 04/18/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date