

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089340

FILED
May 21, 2009
Secretary of State

Entity Name: SUPERIOR STAFFING & CARE SERVICES, LLC

Current Principal Place of Business:

6625 MIAMI LAKES DR, STE 375
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6625 MIAMI LAKES DR, STE 375
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 26-3301288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MORAZAN, MAYRA S
7500 N.W. 25 STREET, SUITE 215
MIAMI, FL 33122 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MUNOZ, ANA CRISTINA
Address: 165 NW 164 AVE.
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: MORAZAN, MAYRA S
Address: 120 S.W. 65 AVENUE
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES:

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 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: ANA CRISTINA MUNOZ

MGRM

05/21/2009

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