

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000126525

FILED
May 06, 2011
Secretary of State

Entity Name: STAFFING GROUP EAST NVOP, LLC

Current Principal Place of Business:

3820 STATE STREET
SANTA BARBARA, CA 93105

New Principal Place of Business:

Current Mailing Address:

3820 STATE STREET
SANTA BARBARA, CA 93105

New Mailing Address:

FEI Number: 30-0016021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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
Name: TANDEM STAFFING SOLUTIONS, INC.
Address: 2830 STATE STREET
City-St-Zip: SANTA BARBARA, CA 93105

Title: PRES
Name: SORENSEN, PAUL
Address: 3820 STATE STREET
City-St-Zip: SANTA BARBARA, CA 93105 US

Title: VP
Name: HULME, RICHARD
Address: 3820 STATE STREET
City-St-Zip: SANTA BARBARA, CA 93105

Title: SEC
Name: OLSON, ROBERT
Address: 3820 STATE STREET
City-St-Zip: SANTA BARBARA, CA 93105

Title: DIR
Name: SORENSEN, DAVID S
Address: 3820 STATE STREET
City-St-Zip: SANTA BARBARA, CA 93105

I hereby 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: PAUL SORENSEN

PRES

05/06/2011

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