

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002363

FILED
May 08, 2007
Secretary of State

Entity Name: MEDICAL STAFFING HOLDINGS, LLC

Current Principal Place of Business:

901 YAMATO RD., STE. 110
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

901 YAMATO RD., STE. 110
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: ADAMSON, ROBERT
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: LITTLE, KEVIN S
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: DONOHOE, PATRICIA
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: WESTER, DAVID
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: ACKERMAN, JOEL
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: WENSTRUP, DAVID
Address: 901 YAMATO ROAD #110
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES:

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

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

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

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

Title: () Change () Addition
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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: KEVIN S. LITTLE

MGRM

05/08/2007

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