

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000646

FILED
Apr 23, 2004
Secretary of State

Entity Name: HEADWAY CORPORATE STAFFING SERVICES OF FLORIDA, L.L.C.

Current Principal Place of Business:

14750 NW 77TH CT., SUITE 305
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

14750 NW 77TH CT., SUITE 305
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 13-4008388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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/MEMBERS:

Title: MGR () Delete
Name: LIST, MICHAEL
Address: 317 MADISON AVE.
City-St-Zip: NEW YORK, NY 10017

Title: MGR (X) Delete
Name: KAMLER, GARY
Address: 14750 NW 77TH CT., SUITE 305
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR (X) Delete
Name: BENCINI, HILARY
Address: 14750 NW 77TH CT., SUITE 305
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR (X) Delete
Name: LEVINSON, PHILICIA
Address: 850 THIRD AVE.
City-St-Zip: NEW YORK, NY 10022

Title: MGR (X) Delete
Name: ROSEMAN, BARRY
Address: 850 THIRD AVE.
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KAMLER, GARY L
Address: 6421 CONGRESS AVENUE #114
City-St-Zip: BOCA RATON, FL 33487

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 for the exemption stated in Section 119.07(3)(i), 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: GARY L. KAMLER

MGR

04/23/2004

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