## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000114145

Entity Name: FIRST STAFFING, CORP.

**FILED** Sep 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6151 MIRAMAR PKWY 5624 NW 2ND AVE. SUITE 201 MIRAMAR, FL 33023 MIAMI, FL 33027

**Current Mailing Address: New Mailing Address:** 

6151 MIRAMAR PKWY P.O BOX 371334 SUITE 201 MIAMI, FL 33027 MIRAMAR, FL 33023

FEI Number: 65-1060938 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERNAN, TORRES PELI, FELIX 2551 WILEY CT 5624 NW 2ND AVE. HOLLYWOOD, FL 33020 US MIAMI, FL 33027 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: HERNAN TORRES 09/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change ( ) Addition TORRES, HERNAN Name: TORRES, HERNAN 6151 MIRAMAR PKWY 201 5624 NW 2ND AVE. Address:

Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: MIAMI, FL 33027

VST Title: Title: () Delete (X) Change ( ) Addition PELI, FELIX PELI, FELIX Name: Name:

6151 MIRAMAR PKWY 201 5624 NW 2ND AVE. Address: Address: MIAMI, FL 33027 City-St-Zip: MIRAMAR, FL 33023 City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title:

MONTANO, NYDIA MONTANO, NYDIA Name: Name: 6151 MIRAMAR PKWY 201 5624 NW 2ND AVE. Address: Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: MIAMI, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERNAN TORRES **PST** 09/01/2006