


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000101446


1. Entity Name
BEINGRECRUITED.COM, INC.



Principal Place of Business Mailing Address

4400 BAYOU BLVD **4400 BAYOU BLVD**
SUITE 12 **SUITE 12**
PENSACOLA, FL 32503 **PENSACOLA, FL 32503**

DO NOT WRITE IN THIS SPACE



01282008 No Chg-P CR2E034 (11/05)

4. FEI Number 06-1629312	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NICKELSEN, ERIC J
17 W. CEDAR STREET
SUITE 3
PENSACOLA, FL 32502

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5:00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SECT
NAME	NICKELSEN, ERIC J
STREET ADDRESS	17 W. CEDAR STREET, SUITE 3
CITY-ST-ZIP	PENSACOLA, FL 32502
TITLE	PRES
NAME	ANDERSEN, NIELS
STREET ADDRESS	4400 BAYOU BLVD, SUITE 12
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	VP
NAME	O'SULLIVAN, J. MORT
STREET ADDRESS	316 S. BAYLEN
CITY-ST-ZIP	PENSACOLA, FL 32502
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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04/10/08-80062-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____ **3/25/08** 810-477-2475

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #