

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104562

FILED
Mar 08, 2005
Secretary of State

Entity Name: MEDICAL STAFFING SOURCE OF AMERICA INC.

Current Principal Place of Business:

2304 MESSEGEN CIR.
SAFETY HARBOR, FL 34695

New Principal Place of Business:

2304 MESSENGER CIR.
SAFETY HARBOR, FL 34695

Current Mailing Address:

PO BOX 3490
CLEARWATER BEACH, FL 33767

New Mailing Address:

FEI Number: 11-3659160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANE, DOUGLAS
2304 MESSEGEN CIRCLE.
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

KANE, DOUGLAS
2304 MESSENGER CIRCLE.
SAFETY HARBOR, FL 34695 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:

03/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KANE, DOUGLAS
Address: 2304 MASSEGEN CIR.
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KANE, DOUGLAS
Address: 2304 MASSENGER CIR.
City-St-Zip: SAFETY HARBOR, FL 34695

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 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: DOUGLAS KANE

MR

03/08/2005

Electronic Signature of Signing Officer or Director

Date