

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107501

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: PRIME HEALTH CARE STAFFING SOLUTIONS, INC.

**Current Principal Place of Business:**

5881 WEST GRAND DUKE CIRCLE  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

5881 WEST GRAND DUKE CIRCLE  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 46-0502709

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DIBIANO, CANDICE  
11711 S W 10TH ST  
DAVIE, FL 33325 US

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

DIBIANO, CANDICE  
5881 WEST GRAND DUKE CIRCLE  
TAMARAC, FL 33321 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:

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DIBIANO, CANDICE  
Address: 11711 SW 10 STREET  
City-St-Zip: DAVIE, FL 33325

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DIBIANO, CANDICE  
Address: 5881 WEST GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321

Title: VP ( ) Change (X) Addition  
Name: JOHNSON, SHAWN M VP  
Address: 5881 WEST GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321 US

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: CANDICE DIBIANO

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date