


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90023 016 ***150.00

DOCUMENT # P02000113818 1. Entity Name CONNECT EMPLOYMENT SOLUTIONS, INC.	
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Principal Place of Business C/O BOONE, 2255 GLADES RD STE 324A BOCA RATON, FL 33431	Mailing Address C/O BOONE, 2255 GLADES RD STE 324A BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HCRM CORP.
2200 CORPORATE BLVD NW STE 401
BOCA RATON, FL 33431

**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, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOONE, WILLIAM J JR 6751 E BOCA PINES TRAIL BOCA RATON, FL 33433
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: William J. Boone Jr. 4/1/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #