2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P03000079900

Entity Name: A PRIME NURSES REGISTRY, INC.

Current Principal Place of Business:

9155 S. DADELAND BLVD
SUITE 1008
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9155 S. DADELAND BLVD
SUITE 1008
MIAMI, FL 33156

New Mailing Address:

FEI Number: 14-1895001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EMANUEL, RONALD M
3001 PONCE DE LEON BLVD., SUITE 262
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHOOR, BARRY G
Address: 701 BELLA VISTA AVE
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHOOR, BARRY G
Address: 8395 SW 73RD AVENUE, # 404
City-St-Zip: MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify 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: BARRY G SHOOR PRES 03/23/2009
Electronic Signature of Signing Officer or Director Date