

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90017 009 ***150.00

DOCUMENT # P03000083247

1. Entity Name

L.B. STAFFING, INC.



Principal Place of Business

5120 EL CLARO SOUTH
WEST PALM BEACH FL 33415

Mailing Address

5120 EL CLARO SOUTH
WEST PALM BEACH FL 33415



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

City & State

4. FEI Number

05-0580765

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERNAL, LIGIA
5120 EL CLARO SOUTH
WEST PALM BEACH FL 33415

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Ligia Bernal

(NOTE: Registered Agent signature required when reinstating)

4/25/08

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME BERNAL, LIGIA
STREET ADDRESS 5120 EL CLARO SOUTH
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☒ Delete
NAME CRUZ, JOSE N
STREET ADDRESS 5120 EL CLARO SOUTH
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME Jacqueline Goshiga
STREET ADDRESS 5120 EL CLARO S.
CITY-ST-ZIP WP Beach, FL 33415

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☒ Change ☐ Addition
NAME Sandra Bauder
STREET ADDRESS 1533 River Run Dr.
CITY-ST-ZIP Danham Springs, LA 70726

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Ligia Bernal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/25/08 561-228-8631

Daytime Phone #