

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098992

Entity Name: N SOURCE HR SOLUTIONS, INC.

FILED  
Jul 27, 2007  
Secretary of State

## Current Principal Place of Business:

809 N.E. 199TH STREET  
#104  
MIAMI, FL 33179 US

## New Principal Place of Business:

1855 NW 52 STREET  
MIAMI, FL 33142 US

## Current Mailing Address:

809 N.E. 199TH STREET  
#104  
MIAMI, FL 33179 US

## New Mailing Address:

1855 NW 52 STREET  
MIAMI, FL 33142 US

FEI Number: 20-3143974

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEASMAN, IRA J  
809 N.E. 199TH STREET  
#104  
MIAMI, FL 33179 US

## Name and Address of New Registered Agent:

NEASMAN, IRA J  
1855 NW 52 STREET  
MIAMI, FL 33142 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:

07/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NEASMAN, IRA J  
Address: 809 N.E. 199TH STREET #104  
City-St-Zip: MIAMI, FL 33179 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NEASMAN, IRA J  
Address: 1855 NW 52 STREET  
City-St-Zip: MIAMI, FL 33142 US

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: IRA J NEASMAN

P

07/27/2007

Electronic Signature of Signing Officer or Director

Date