

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028425

FILED
May 08, 2008
Secretary of State

Entity Name: HIGHER LEVEL STAFFING, INC.

Current Principal Place of Business:

402 LAMANCHA AVE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

18811 40TH RUN NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

18811 40TH RUN NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-4407079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, ANTHONY G JR.
3275 W HILLSBORO BLVD
#207
DEERFIELD BEACH, FL 33442 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCKENZIE, SHEREENE
Address: 402 LAMANCHA AVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: MCKENZIE, STANTON
Address: 402 LAMANCHA AVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCKENZIE, SHEREENE
Address: 18811 40TH RUN NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D (X) Change () Addition
Name: MCKENZIE, STANTON
Address: 18811 40TH RUN NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

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: SHEREENE MCKENZIE

D

05/08/2008

Electronic Signature of Signing Officer or Director

Date