

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000042481

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** CLIENT OUTSOURCE SOLUTIONS, INC.

**Current Principal Place of Business:**

101 S.E. 6TH AVE.  
SUITE D  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

665 SE 10TH ST #201  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 20-4581643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DICRESCENZO, ANGELA  
665 SE 107 TH STREET  
SUITE 201  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

DELGADO, ANGELA  
665 SE 107 TH STREET  
SUITE 201  
DEERFIELD BEACH, FL 33441 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:** ANGELA DELGADO CPA

04/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P, D  
**Name:** HARRISON, JOSEPH TODD  
**Address:** 101 S.E. 6TH AVE., SUITE D  
**City-St-Zip:** DELRAY BEACH, FL 33483

I hereby 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 all other like empowered.

**SIGNATURE:** JOSEPH HARRISON

P

04/27/2011

Electronic Signature of Signing Officer or Director

Date