

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113858

FILED
May 06, 2007
Secretary of State

Entity Name: E M NURSING SERVICES, CORP.

Current Principal Place of Business:

310 FONTAINBLEAU BLVD., APT. 103
MIAMI, FL 33172

New Principal Place of Business:

8912 WEST FLAGLER ST
108
MIAMI, FL 33174

Current Mailing Address:

310 FONTAINBLEAU BLVD., APT. 103
MIAMI, FL 33172

New Mailing Address:

5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, EDDY J
310 FONTAINBLEAU BLVD., APT. 103
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

AG CORPORATE SERVICES
5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126 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: DOMINGO ALONSO

05/06/2007

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: PD () Delete
Name: MARTINEZ, EDDY J
Address: 310 FONTAINBLEAU BLVD., APT. 103
City-St-Zip: MIAMI, FL 33172

Title: VD () Delete
Name: JOGLAR, OMAR
Address: 310 FONTAINBLEAU BLVD., APT. 103
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARTINEZ, EDDY J
Address: 8912 WEST FLAGLER ST # 108
City-St-Zip: MIAMI, FL 33174

Title: VD (X) Change () Addition
Name: JOGLAR, OMAR
Address: 8912 WEST FLAGLER ST # 108
City-St-Zip: MIAMI, FL 33174

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: EDDY J MARTINEZ

PD

05/06/2007

Electronic Signature of Signing Officer or Director

Date