

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000116270

Entity Name: MEDI-STAFF EXPERTS, INC

FILED
Aug 19, 2009
Secretary of State

Current Principal Place of Business:

150 NW 168 STREET
SUITE 215
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

150 NW 168 STREET
SUITE 215
NORTH MIAMI BEACH, FL 33169

New Mailing Address:

FEI Number: 51-0599391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESCARMENT, WILLFEL
501 NE 134 STREET
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

BONAPARTE, NICOLE D
150 NW 168TH ST
215
N. MIAMI BEACH, FL 33169 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: NICOLE BONAPARTE, CPC, CPC-I

08/19/2009

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: P () Delete
Name: ESCARMENT, WILLFEL
Address: 150 NW 168 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33169

Title: VP () Delete
Name: BONAPARTE, NICOLE
Address: 150 NW 168 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BONAPARTE, NICOLE D
Address: 150 NW 168 STREET, SUITE 215
City-St-Zip: NORTH MIAMI BEACH, FL 33169

Title: VP (X) Change () Addition
Name: DE JESUS, BRENDA
Address: 150 NW 168 STREET, SUITE 215
City-St-Zip: NORTH MIAMI BEACH, FL 33169

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: NICOLE BONAPARTE, CPC, CPC-I

P

08/19/2009

Electronic Signature of Signing Officer or Director

Date