

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118339

FILED
Jan 16, 2012
Secretary of State

Entity Name: ECA STAFFING SOLUTIONS INC.

Current Principal Place of Business:

10033 SAWGRASS DRIVE WEST #104
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

10033 SAWGRASS DRIVE WEST #104
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 20-5546044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY, JAMES
10033 SAWGRASS DRIVE WEST #104
PONTE VEDRA BEACH, FL 32082 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: MAY, KELLY
Address: 10033 SAWGRASS DRIVE WEST #104
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: TRES
Name: MAY, JAMES
Address: 10033 SAWGRASS DRIVE WEST #104
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: SECT
Name: MAY, JAMES
Address: 10033 SAWGRASS DRIVE WEST #104
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: DIR
Name: MAY, KELLY
Address: 10033 SAWGRASS DRIVE WEST #104
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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: JAMES MAY

TRES

01/16/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date