

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144378

FILED
Jan 08, 2008
Secretary of State

Entity Name: PROTECH STAFFING OF FLORIDA, INC.

Current Principal Place of Business:

7216 CHANCERY LN.
SUITE 1
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

7216 CHANCERY LN.
SUITE 1
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 20-5901915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECLAIR, VICKIE
7216 CHANCERY LANE
SUITE 1
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LECLAIR, VICKIE M PRESIDE
7216 CHANCERY LANE
SUITE 1
ORLANDO, FL 32809 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: VICKIE LECLAIR

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LECLAIR, VICKIE P PRES
Address: 7216 CHANCERY LANE SUITE 1
City-St-Zip: ORLANDO, FL 32809 US

Title: VP () Delete
Name: MEIER, ROBERT P V-PRES
Address: 11837 SIR WINSTON WAY
City-St-Zip: ORLANDO, FL 32824 US

Title: SEC () Delete
Name: LECLAIR, VICKIE M SEC
Address: 7216 CHANCERY LANE SUITE 1
City-St-Zip: ORLANDO, FL 32809 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VICKIE LECLAIR

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date