

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077118

Entity Name: NEED CARE STAFFING ,INC.

FILED
Feb 26, 2009
Secretary of State

Current Principal Place of Business:

175 FONTAINEBLEAU BLVD
SUITE 2J5
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

175 FONTAINEBLEAU BLVD
SUITE 2J5
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 26-3246178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BECERRA, NELSON
5255 COLLINS AVE
3A
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

BECERRA, NELSON
6251 NW 170 TER
HIALEAH, FL 33015 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: _____

Electronic Signature of Registered Agent

02/26/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BECERRA, NELSON
Address: 5255 COLLINS AVE APT. 3A
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BECERRA, NELSON
Address: 6251 NW 170 TER
City-St-Zip: HIALEAH, FL 33015 US

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: NELSON BECERRA

P

02/26/2009

Electronic Signature of Signing Officer or Director

Date