

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000002724

**FILED**  
**Jan 29, 2011**  
**Secretary of State**

**Entity Name:** PARTNER STAFFING SOLUTIONS, INC.

**Current Principal Place of Business:**

7845 WEST 36 AVE  
UNIT 202  
HIALEAH, FL 33018

**New Principal Place of Business:**

12334 NW 97 PLACE  
HIALEAH GARDENS, FL 33018

**Current Mailing Address:**

PO BOX 161341  
HIALEAH, FL 33016

**New Mailing Address:**

**FEI Number:** 26-3927607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PERALTA, RAFAEL A SR  
12334 NW 97 PLACE  
HIALEAH GARDENS, FL 33018 US

**Name and Address of New Registered Agent:**

PERALTA, RAFAEL A  
12334 NW 97 PLACE  
HIALEAH GARDENS, FL 33018 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: RAFAEL A PERALTA

01/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PERALTA, RAFAEL A  
Address: 12334 NW 97 PLACE  
City-St-Zip: HIALEAH GARDENS, FL 33018

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: RAFAEL A PERALTA

PRES

01/29/2011

Electronic Signature of Signing Officer or Director

Date