2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P93000084427 1. Entity Name 07 MAR -2 AM 11:01 NIGHTSHIFT TEMPS, INC. SECRETARY OF STATE IALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3040 GULF TO BAY BLVD. 3040 GULF TO BAY BLVD. CLEARWATER, FL 33759 CLEARWATER, FL 33759 02142007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 59-3217841 Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAMONT, DAVID DO NOT WRITE 3040 GULF TO BAY BLVD. CLEARWATER, FL 33759 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE ______Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 500092277575 /12/07--01017--010 **3961.25 FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees [3] Trust Fund Contribution. OFFICERS AND DIRECTORS 10. PST TITLE MONGELUZZI, FRANK NAME STREET ADDRESS 30750 US HWY 19 N CITY-ST-ZIP PALM HARBOR, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP K. Eckel MAR 0 5 2007 TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementation 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 in Block 10 or Block 11 if changed, or on an attachment w SIGNATURE: