2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000079508

1. Entity Name

GLOBAL COMPUTER STAFFING, INC.



FILED Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

3226 PARKSIDE CENTER CIRCLE TAMPA, FL 33619

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DO NOT WRITE IN THIS SPACE

01292008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3403221

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plons of registered agent	surpose of changing its registered of	fice or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signerure, typeo or printed name of registered agent and title if applicable. (NOTE Registered Agent and title if applicable.				Agoid signature required when reinstating) 1)A1)-	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000902746 04/30/08-30018-011 150.00
10. ITHE NAME STREET ADDRESS CHY-SI-ZIP	PSTD FILA, JOANNA C 6208 MARBELLA BLVD	CTORS			
THE CHY-ST-ZIP STREET ADDRESS CHY-ST-ZIP	APOLLO BEACH, FL 33572			y •	· · · · · · · · · · · · · · · · · · ·
NAME SHEET ADDRESS CHY-SI-ZIP			DO NOT WRITE IN THIS SPACE		
NAMI STREET ADDRESS CITY-ST-ZIP					
HILT NAME STREET ADDRESS CITY-ST-ZIP				·	•
TITLE NAME STREET ADDRESS					

12. Thereby 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 supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

JOANNA C FILA

4-15-08

<u>8134967251 = 257</u>

Digitic Phone #