

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000057303

Entity Name: A.M. CARE STAFFING, INC.

FILED
Jan 06, 2006
Secretary of State

Current Principal Place of Business:

1100 NE 163 ST
SUITE 300
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

1100 NE 163 ST
SUITE 300
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

1100 NE 163 ST
SUITE 304
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

1100 NE 163 ST
SUITE 304
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-0849894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLINGAN, MARIO
804 VERONA LAKE DRIVE
FT LAUDERDALE, FL 33326 US

Name and Address of New Registered Agent:

PEREZ, AMELIA
804 VERONA LAKE DRIVE
WESTON, FL 33326 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: AMELIA PEREZ

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOLINGAN, MARIO
Address: 804 VERONA LAKE DRIVE
City-St-Zip: FT LAUDERDALE, FL 33326

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOLINGAN, MARIO
Address: 804 VERONA LAKE DRIVE
City-St-Zip: WESTON, FL 33326

Title: S () Change (X) Addition
Name: PEREZ, AMELIA
Address: 804 VERONA LAKE DR
City-St-Zip: WESTON, FL 33326 US

I hereby certify that the information supplied with this filing does not qualify for the 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: AMELIA PEREZ

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01/06/2006

Electronic Signature of Signing Officer or Director

Date