

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022136

FILED
Apr 28, 2006
Secretary of State

Entity Name: CARLISLE STAFFING EAST COAST, INC.

Current Principal Place of Business:

4101 RAVENSWOOD ROAD
SUITE 130
DANIA, FL 33312

New Principal Place of Business:

Current Mailing Address:

4101 RAVENSWOOD ROAD
SUITE 130
DANIE, FL 33312

New Mailing Address:

FEI Number: 65-0912727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAFOFSKY, HARVEY
4101 RAVENSWOOD ROAD
130
DANIA, FL 33312 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARCUS, STEWART
Address: 3250 MARY ST 5TH FLOOR
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: RAFOFSKY, HARVEY
Address: 4101 RAVENSWOOD ROAD, SUITE 130
City-St-Zip: DANIA, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARCUS, JANE
Address: 3250 MARY ST 5TH FLOOR
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HARVEY RAFOFSKY

D

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date