

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095162

FILED  
Jan 20, 2012  
Secretary of State

**Entity Name:** DIVERSIFIED STAFFING, INC.

**Current Principal Place of Business:**

3440 HOLLYWOOD BLVD.  
SUITE 415  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

3440 HOLLYWOOD BLVD.  
SUITE 415  
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number:** 65-0959487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARBELAEZ, RENEE  
290 174TH ST., APT. 501  
SUNNY ISLES, FL 33160 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ARBELAEZ, RENEE  
Address: 290 174TH ST., APT. 501  
City-St-Zip: SUNNY ISLES, FL 33160

Title: VD  
Name: HOLLINS, NANCEE  
Address: 11379 SEAGRASS CIRCLE  
City-St-Zip: BOCA RATON, FL 33498

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: RENEE ARBELAEZ

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01/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date