

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000005464

**Entity Name:** ACCUSOURCE EMPLOYMENT SCREENING, INC.

**Current Principal Place of Business:**

42251 ALTANOS ROAD  
TEMECULA, CA 92592

**FILED**  
**Apr 27, 2022**  
**Secretary of State**  
**8423710456CC**

**Current Mailing Address:**

30650 RANCHO CALIFORNIA RD., D406-215  
TEMECULA, CA 92591 US

**FEI Number: 33-0678905**

**Certificate of Status Desired: No**

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

INCORP SERVICES, INC.  
17888 67TH CT N  
LOXAHATCHEE, FL 33470 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name CHARTON, LIANNE  
Address 30650 RANCHO CALIFORNIA RD.,  
D406-215  
City-State-Zip: TEMECULA CA 92591

Title DIRECTOR  
Name CHARTON, LIANNE  
Address 30650 RANCHO CALIFORNIA RD.,  
D406-215  
City-State-Zip: TEMECULA CA 92591

Title DIRECTOR  
Name HOLDER, LISA  
Address 42251 ALTANOS ROAD  
City-State-Zip: TEMECULA CA 92592

Title PRESIDENT  
Name CHARTON, LIANNE  
Address 30650 RANCHO CALIFORNIA RD.,  
D406-215  
City-State-Zip: TEMECULA CA 92591

Title SECRETARY  
Name HOLDER, LISA  
Address 42251 ALTANOS ROAD  
City-State-Zip: TEMECULA CA 92592

Title TREASURER  
Name HOLDER, LISA  
Address 42251 ALTANOS ROAD  
City-State-Zip: TEMECULA CA 92592

*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: CHARTON , LIANNE**

**PRESIDENT**

**04/27/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date