



Form Revision Date 07/2016

## ANNUAL REPORT

*(Required by Section 911, Act 284, Public Act of 1972)*

The identification number assigned by the Bureau is: 802153401

Annual Report Filing Year: 2020

1. Corporation Name:

STRATEGIC HEALTHCARE STAFFING INC.

On behalf of the corporation, I certify that no changes have occurred in required information since the last year filed report.

This document must be signed by an authorized officer or agent:

Signed this 8th Day of March, 2020 by:

Signature	Title	Title if "Other" was selected
ANTHONY NNADI	Secretary	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline       Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**  
**FILING ENDORSEMENT**

***This is to Certify that the*** 2020 ANNUAL REPORT

***for***

STRATEGIC HEALTHCARE STAFFING INC.

***ID Number:*** 802153401

***received by electronic transmission on*** March 08, 2020 ***, is hereby endorsed.***

***Filed on*** March 08, 2020 ***, by the Administrator.***

***The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 8th day of March, 2020.***

*Linda Clegg*

***Linda Clegg, Interim Director***

***Corporations, Securities & Commercial Licensing Bureau***