

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 6/25/2020 4:29 PM EST

Confirmation Number: 6693
Amended Confirmation Number: 6692

Employer Information

Name: Healthcare Staffing Professionals, Inc.
Address: 19528 Ventura Blvd., #632
City: Tarzana
State: CA
Zip Code: 91356

Plan Administrator Information

Name: Healthcare Staffing Professionals, Inc.
Address: 19528 Ventura Blvd., #632
City: Tarzana
State: CA
Zip Code: 91356
Phone: 4083773441
Email: maxiej@hsp-inc.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1 Plan Name: HEALTHCARE STAFFING PROFESSIONALS, INC. PHANTOM STOCK PLAN Number of Employees: 3

Additional Information:



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 6693. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.