U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 10-31-2013



This report is mandatory under P.L. 88-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFUL	LLY BEFORE PREPARING THIS REPORT.
(Sprate 53923)	
1. File Number: CGS5	
Person Filling	
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name Michael Rosado	Name
Title President	Title
Organization MROSAdo CONSULTANTS, LLC	Organization
P.O. Box, Bidg., Room No., if any	P.O. Box, Bidg., Room No., if any
street 96 Lipwood PLAZA, Suite 163	Street 5 QUAIL CT
city Fort Lee	City Englewood NJ
State NJ ZIP Code + 4 67024	State ZIP Code + 4 07.63/
4. Date fiscal year ends: 5. Type of person:	
8 /2014 a Individual b. Partnership	Corporation d. Other (Specify):
· · · · · · · · · · · · · · · · · · ·	
Nature of Agreement or Arrangement	
8. Full name and address of employer with whom made (include ZIP Code): Name William Conforti - PRS	7. Date entered into:
Organization STILL WELL	8. Name of person(s) through whom made:
Trade Name, if any 46-68 VERNON BLVD	Name
P.O. Box, Bldg., Room No., if any	Name
Street	Name
on Long Is City	Name
State NY ZIP Code +4 1/16/	Name
Signatures	
Each of the industrianed declares, under penalty of perjuly and other applicable penalties of taw, that all of the information submitted in this report (including the information contained in any agriculture) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.)	
13. Signed President (if other title, see	14. Signed Treasurer (If other title, see
Title President instructions)	Title Treasurer instructions)
on 1147014 201-655-9725	
On UTTO 1 JULY 1 Telephone Number	On Date Telephone Number

and the second s		
FIRET M ROSAdo CONSULTANTS	File Number C-	
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing. b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.		
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.): Verbal Agreement to provide consultation and speeches to employees about their rights in excertising orreganging & collective Bargaining		
Terms \$ 187,50 per hr plus expenses		
Specific Activities to be Performed 11 For each activity, senerately list in detail the information required (See Instructions):		
11. For each activity, separately list in detail the information required (See Instructions): a. Nature of activity. To provide consultation And give speeches to employees about their regular to original and baryain collectively. baryain collectively.		
11.b. Period during which performed: 1.b. Period during which period dur	11.c. Extent performed:	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any: Name	
Organization	Organization	
P.O. Box, Bidg., Room No., if any street 7850 South ELM PLACE city Broken Arrow state OKLAhoMA ZIP Code + 4 74011	P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	
12.a. Identify subject groups of employees: WAREHOUSE	12.b. Identify subject labor organizations: TEAMSLES	