

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003057

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** TRI-OVERLOAD STAFFING INC.

**Current Principal Place of Business:**

160 BROADWAY, 15TH FLOOR  
NEW YORK, NY 10038

**New Principal Place of Business:**

**Current Mailing Address:**

160 BROADWAY, 15TH FLOOR  
NEW YORK, NY 10038

**New Mailing Address:**

FEI Number: 27-0581430

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: CASSERA, ROBERT  
Address: 160 BROADWAY, 15TH FLOOR  
City-St-Zip: NEW YORK, NY 10038

Title: S  
Name: TRIPPIEDI, YOLANDA  
Address: 160 BROADWAY, 15TH FLOOR  
City-St-Zip: NEW YORK, NY 10038

Title: T  
Name: URSINO, MARIA  
Address: 160 BROADWAY, 15TH FLOOR  
City-St-Zip: NEW YORK, NY 10038

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: ROBERT CASSERA

PRES

02/17/2010

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

\_\_\_\_\_  
Date