## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000004270

Entity Name: PCI STAFF LEASING, INC.

FILED Apr 05, 2006 Secretary of State

		22/10/140, 1140.						
Current Principal Place of Business:				New Prince	New Principal Place of Business:			
303 MOLN ELMWOO	IAR DR. D PARK, NJ 074	407 US						
Current N	lailing Address:		New Maili	New Mailing Address:				
PO BOX 1 ELMWOO	001 D PARK, NJ 074	407 US						
FEI Number	: 22-3349434	FEI Number Applied	for ( )	FEI Number Not Appl	licable ( )	Certifica	te of Status Desired ( )	
Name and	d Address of Cu	rrent Registered	Agent:	Name and	Address o	f New Reg	istered Agent:	
INCORP S 18450 NE MIAMI, FL								
	e named entity su e of Florida.	bmits this stateme	ent for the pui	pose of changing i	ts registered	d office or re	egistered agent, or both	
SIGNATUI	RE:							
	Electronic	Signature of Reg	istered Agent	İ			Date	
Election Ca	mpaign Financing T	Trust Fund Contribut	tion ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip: Title: Name:	P () D BOFFA JR, ROBE 394 GREEN MTN MAHWAH, NJ 074 V () D BOFFA, BRIAN	ERT RD 430		Title: Name: Address: City-St-Zip: Title: Name:	P BOFFA JR, 25 HILTON I MONTVALE,	PLACE		
Address: City-St-Zip:	28 SHAW RD WOODCLIFF LAK	(E, NJ 07677		Address: City-St-Zip:				
Title: Name: Address: City-St-Zip:	S () D BOFFA, JON 642 RITA DR. RIVERDALE, NJ			Title: Name: Address: City-St-Zip:	S BOFFA, JON 47 SHAW R WOODCLIF		,	
Title: Name: Address: City-St-Zip:	T () D DOFFA, DANIEL 420 GREEN MTN MAHWAH, NJ 074	N RD		Title: Name: Address: Citv-St-Zip:	T BOFFA, DAN 420 GREEN MAHWAH, N	MTN RD	( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELAYNE LYNCH BKPR 04/05/2006