2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000119773

City-St-Zip:

FILED Sep 26, 2005 Secretary of State

DOGGMENT 11 02000110110	oecretary or otate
Entity Name: REEMPLOYMENT OPTIONS, INC.	
Current Principal Place of Business:	New Principal Place of Business:
1800 PEMBROOK DRIVE SUITE 300 ORLANDO, FL 32810	2221 LEE ROAD SUITE 26 WINTER PARK, FL 32789
Current Mailing Address:	New Mailing Address:
1800 PEMBROOK DRIVE SUITE 300 ORLANDO, FL 32810	2221 LEE ROAD SUITE 300 WINTER PARK, FL 32789
FEI Number: 61-1432663 FEI Number Applied For () FEI Nu	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
KOLTUN, JEFFREY M 557 NORTH WYMORE ROAD, SUITE 100 MAITLAND, FL 32751 US	
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: PSTD () Delete Name: DRAZEN, ROBERT	Title: DP (X) Change () Addition Name: DRAZEN, SUSAN

1800 PEMBROOK DRIVE, SUITE 300 2221 LEE ROAD, SUITE 26 City-St-Zip: ORLANDO, FL 32810 City-St-Zip: WINTER PARK, FL 32789 US Title: () Delete Title: VΡ () Change (X) Addition DRAZEN, ROBERT Name: Name: Address: Address: 2221 LEE ROAD, SUITE 26 WINTER PARK, FL 32789 US City-St-Zip: City-St-Zip: Title: Title: () Delete DST () Change (X) Addition Name: Name: ROSS, HELENE Address: Address: 2221 LEE ROAD, SUITE 26

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

WINTER PARK, FL 32789 US

SIGNATURE: SUSAN DRAZEN P 09/26/2005