2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000087205

1. Entity Name
ADVANTAGE EMPLOYER SOLUTIONS II, INC.

FILED
06 JUN 23 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06152006 Chg-P CR2E034 (11/05)

Principal Place of Business	Mailing Address
1911 US HWY 301 N STE 450 TAMPA, FL 33619 US	1911 US HWY 301 N STE 450 TAMPA, FL 33619 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 87-0711718 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOLCOMB, VICTOR W 106 S TAMPANIA AVE STE 200 TAMPA, FL 33609	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARPER, WILLIAM H 2930 JOHN MOORE RD BRANDON, FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition $6/29
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P HARPER, STEVEN D 4311 ROBIN LN TAMPA, FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/VP LIESS, ROBERT M 2602 W SAM ALLEN RD PLANT CITY, FL 33564	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 300078691523 06/28/06--01040--001 **1347.50
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COO SMITH, J E 13811 WHISPERWOOD DR CLEARWATER, FL 33762	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steven D. Harper Steven D Harper 6/16/06 (813)246-5657
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #