

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

02-24-2006 90010 041 ***150.00

DOCUMENT # V10060
 1. Entity Name
ALPHASTAFF GROUP, INC.



Principal Place of Business
**1801 CLINT MOORE RD.
 SUITE 115
 BOCA RATON, FL 33487**

Mailing Address
**1801 CLINT MOORE RD.
 SUITE 115
 BOCA RATON, FL 33487**

2. Principal Place of Business
800 Corporate Drive
 Suite, Apt. #, etc.
Suite 600
 City & State
Fort Lauderdale, FL

3. Mailing Address
800 Corporate Drive
 Suite, Apt. #, etc.
Suite 600
 City & State
Fort Lauderdale, FL



01262006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0314170

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

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO BECK, ROBERT A II 1801 CLINT MOORE RD BOCA RATON, FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP STARKMAN, JAY 1801 CLINT MOORE RD #115 BOCA RATON, FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT KIELY, BRIAN 1801 CLINT MOORE ROAD, STE 115 BOCA RATON, FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV GATLEY, HEATHER 1801 CLINT MOORE ROAD, STE 115 BOCA RATON, FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LABARTA, RAFAEL 1801 CLINT MOORE RD. BOCA RATON, FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV PENATE, MANUEL 1801 CLINT MOORE RD. BOCA RATON, FL 33487 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/COO/Executive Chairman Beck, Robert A II 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO/P/D/S Starkman, Jay 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT Kiely, Brian 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV Gatley, Heather 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV Labarta, Rafael 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV Penate, Manuel 800 Corporate Drive Suite 600 Fort Lauderdale, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 empowerments.

SIGNATURE: Joseph Bell
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/11/06 Daytime Phone # (954) 207-1760

ATTACHMENT
ALPHASTAFF
Simplifying Business. Benefiting People

BLOCK 10 ADDITIONS

66010431
V10060

VP

Joseph Bello
800 Corporate Drive, Suite 600
Fort Lauderdale, FL 33334

VP

William Leahy
800 Corporate Drive, Suite 600
Fort Lauderdale, FL 33334

VP

Thomas Ivey
800 Corporate Drive, Suite 600
Fort Lauderdale, FL 33334

