

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000073258

**Entity Name:** ALLSTAFF, INC.

**Current Principal Place of Business:**

9800 4TH STREET NORTH  
SUITE 105  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

9800 4TH STREET NORTH  
SUITE 105  
ST. PETERSBURG, FL 33702

**FEI Number:** 90-0754103

**Certificate of Status Desired:** No

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

BOLTICOFF, THOMAS D  
9800 4TH STREET NORTH  
SUITE 105  
ST. PETERSBURG, FL 33702 US

*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

**Officer/Director Detail :**

Title            P  
Name            BOLTICOFF, THOMAS D  
Address        9800 4TH STREET NORTH  
                  SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33702

Title            V  
Name            TRAVELER, MELANIE M  
Address        9800 4TH STREET NORTH  
                  SUITE 105  
City-State-Zip: ST. PETERSBURG FL 33702

*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:** THOMAS D. BOLTICOFF

**PRESIDENT**

**01/27/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date