



2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # B99000000057 1. Entity Name RANDSTAD US, L.P.					
Principal Place of Business 2015 SOUTH PARK PLACE ATLANTA, GA 30339			Mailing Address 177 CROSSWAYS PARK DRIVE WOODBURY, NY 11797		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		04252005 Chg-LP CR2E003 (10/03)	
Zip		Country		4. FEI Number 58-2414177	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$999.00		10. Amount of Capital Contributions in FLORIDA to date.			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	M99000000142 RANDSTAD GENERA PARTNER (US) LLC 2015 SOUTH PARK PLACE ATLANTA, GA 30339		STREET ADDRESS CITY-ST-ZIP	<div style="text-align: center;"> UN00000365791 05/11/05-80016-016 141.25 </div>	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date _____ Daytime Phone # _____		

STAPLE CHECK HERE

*Robert Calabro, VP for
 Randstad General Partner (US) LLC*

4/26/05