2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003303

Entity Name: ALLSTAFF MANAGEMENT, INC.

FILED Apr 10, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

575-K OLD NORCROSS ROAD LAWRENCEVILLE, GA 30045

Current Mailing Address: New Mailing Address:

P.O. BOX 48 111 N. ORANGE AVE. LAWRENCEVILLE, GA 300460048 STE. 2000

ORLANDO, FL 32801 US

FEI Number: 58-1531342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPDIRECT AGENTS
515 E. PARK AVE.
TALLAHASSEE, FL 32301 US

BERMAN, KEAN & RIGUERA, P.A.
2101 W. COMMERCIAL BLVD.
STE. 2800
FT. LAUDERDALE, FL 33309 US

TT. EAODENDALE, TE 30000 OC

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: RICHARD E. BERMAN, ESQ. 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD () Delete Title: D (X) Change () Addition Name: REICHEL, JEFFREY Name: REICHEL, JEFFREY Address: 197 TIMBERLOST TRAIL Address: 111 N. ORANGE AVE., STE. 2000

 Address:
 197 TIMBERLOST TRAIL
 Address:
 111 N. ORANGE AVE., STE. 2000

 City-St-Zip:
 SUWANEE, GA 30024
 City-St-Zip:
 ORLANDO, FL 32801 US

Title: SD () Delete Title: P (X) Change () Addition Name: REICHEL, BEVERLY Name: HABER, LARRY

Address: 197 TIMBERLOST TRAIL Address: 111 N. ORANGE AVE., STE. 2000
City-St-Zip: SUWANEE, GA 30024 City-St-Zip: ORLANDO, FL 32801

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 SAMS, RICK

 Address:
 Address:
 111 N. ORANGE AVE., STE. 2000

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32801 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: JEFFREY REICHEL D 04/10/2006