2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# F02000002166

Entity Name: ASSIGNMENT AMERICA, INC.

Current Principal Place of Business:

6551 PARK OF COMMERCE BLVD., N.W.
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6551 PARK OF COMMERCE BLVD., N.W.
ATTN: STEPHANIE PAPOULIS
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 65-1113081 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: CINDY HARRIS

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MULLARKEY, SYLVIA
Address: 40 EASTERN AVENUE
City-St-Zip: MALDEN, MA 02148

Title: AT ( ) Delete
Name: LEWIS, DANIEL
Address: 6551 PARK OF COMMERCE BLVD., N.W.
City-St-Zip: BOCA RATON, FL 33487

Title: S ( ) Delete
Name: RUBIN, STEPHEN
Address: 1585 BROADWAY
City-St-Zip: NEW YORK, NY 10036

Title: A/S ( ) Delete
Name: BALL, SUSAN
Address: 6551 PARK OF COMMERCE BLVD., N.W.
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete
Name: WARD, JONATHAN
Address: 6551 PARK OF COMMERCE BLVD., N.W.
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete
Name: KALAFA, VICTOR
Address: 6551 PARK OF COMMERCE BLVD., N.W.
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN E. BALL A/S 10/10/2007

Electronic Signature of Signing Officer or Director — Date