

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004993

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: TANDEM STAFFING SOLUTIONS, INC.

## Current Principal Place of Business:

1690 S. CONGRESS AVE., STE. 210  
DELRAY BEACH, FL 33445

## New Principal Place of Business:

1690 S. CONGRESS AVE.  
STE. 210  
DELRAY BEACH, FL 33445

## Current Mailing Address:

1690 S. CONGRESS AVE., STE. 210  
DELRAY BEACH, FL 33445

## New Mailing Address:

1690 S. CONGRESS AVE.  
STE. 210  
DELRAY BEACH, FL 33445

FEI Number: 30-0015919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WECHSLER, RAYMOND  
Address: 1690 S. CONGRESS AVE., STE. 210  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: ABADRE, CHARLES  
Address: 1690 CONGRESS AVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: S (X) Delete  
Name: PORTER, DARRYL  
Address: 1690 S. CONGRESS AVE., STE. 210  
City-St-Zip: DELRAY BEACH, FL 33445

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ABADIE, CHARLES  
Address: 1690 S. CONGRESS AVE., STE. 210  
City-St-Zip: DELRAY BEACH, FL 33445

Title: SECY (X) Change ( ) Addition  
Name: ALSTON, HEATHER C  
Address: 1690 CONGRESS AVE  
City-St-Zip: DELRAY BEACH, FL 33445

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HEATHER C. ALSTON

SECY

04/25/2005

Electronic Signature of Signing Officer or Director

Date