

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000000305

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** UNIFORCE STAFFING SERVICES, INC.

**Current Principal Place of Business:**

999 STEWART AVENUE, SUITE 100  
BETHPAGE, NY 11714 US

**New Principal Place of Business:**

**Current Mailing Address:**

999 STEWART AVENUE, SUITE 100  
BETHPAGE, NY 11714 US

**New Mailing Address:**

**FEI Number:** 11-3142245

**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

**OFFICERS AND DIRECTORS:**

**Title:** PCEO  
**Name:** SCHULTZ, ANDREW  
**Address:** 301 YAMATO ROAD, SUITE 3199  
**City-St-Zip:** BOCA RATON, FL 33431

**Title:** SVPF  
**Name:** GOLIO, TERESA  
**Address:** 999 STEWART AVENUE, SUITE 100  
**City-St-Zip:** BETHPAGE, NY 11714

**Title:** VPS  
**Name:** FELTMAN, ARTHUR A  
**Address:** 999 STEWART AVENUE  
**City-St-Zip:** BETHPAGE, NY 11714

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:** ARTHUR A. FELTMAN

VPS

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date