2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 12, 2008 8:00 am Secretary of State DOCUMENT # F95000001957 05-12-2008 90034 001 ***550.00 INTELISTAF HEALTHCARE, INC. Principal Place of Business Mailing Address 18W140 BUTTERFIELD RD 18 W 140 BUTTERFIELD RD SUITE 600 OAKBROOK TERRACE, IL 60181 OAKBROOK TERRACE, IL 60181 2. Principal Place of Business - No.P.O. Box # 3. Mailing Address 901 Yamata Road ite, Apt. #, etc. 01162008 Chg-P CR2E034 (12/06) ろいけと ひん City & State Rotton City & State 4. FEI Number Applied For Raton 11-3257108 Not Applicable Country Country States \$8.75 Additional Inited States 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATE CREATIONS NETWORK INC. Street Address (P.O. Box Number is Not Acceptable) 11380 PROSPERITY FARMS RD #221E PALM BEACH GARDENS, FL 33410 Zip Code 8. The above named entity subgrits 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 QX SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD President - Director. TITLE ☐ Delete Change ☐ Addition Kevin B. Little, 901 Yamato Rd., Sufte 110 WILSTEAD, MICHAEL NAME NAME STREET ADDRESS 18 WEST 140 BUTTERFIELD RD STE 600 STREET ADDRESS Bixa Roton, Fl 33431 OAKBROOK TERRACE, IL 60181 CITY-ST-ZIP CITY-ST-ZIP Treasurer-Director Michael J. Michaelno gayamato Rd, Sutte 110 BXG Raton, FL 3431 TITLE D Delete Change ☐ Addition FRIEDMANN, RALPH NAME NAME STREET ADDRESS 18W140 BUTTERFIELD RD STREET ADDRESS CITY-ST-ZIP OAKBROOK TERRACE, IL 60181 CITY-ST-ZIP TITLE ☐ Delete TITLE Secretary Drector ☐ Change ☐ Addition Jeff yesner adiyamatordysoute 110 Bora Raton FL 33431 THOMAS, MARK NAME NAME STREET ADDRESS 18W140 BUTTERFIELD STE 600 STREET ADDRESS CITY-ST-ZIP OAKBROOK TERRACE, IL 60181 CITY-ST-ZIP SEC TITLE Delete TITLE ☐ Change ■ Addition NAME CARR, MARY NAME 18 WEST 140 BUTTERFIELD RD STE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OAKBROOK TERRACE, IL 60181 CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME FOODEN, BRYAN T NAME STREET ADDRESS 18 WEST 140 BUTTERFIELD RD STE 600 STREET ADDRESS CITY-ST-ZIP OAKBROOK TERRACE, IL 60181 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 trutgee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

REAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

561-322-130D

Daytime Phone #