2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005943

Entity Name: MEDICAL STAFFING NETWORK HOLDINGS, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
901 YAMAT SUITE #110 BOCA RAT				
Current Mailing Address:		New Mailir	New Mailing Address:	
901 YAMAT SUITE #110 BOCA RAT				
FEI Number:	65-0865171 FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
	TO ROAD) TON, FL 33431 US			
The above in the State		purpose of changing it	s registered office or registered agent, or both,	
SIGNATUR				
	Electronic Signature of Registered Ag	ent	Date	
	e with s. 607.193(2)(b), F.S., the corporation did n paign Financing Trust Fund Contribution().	ot receive the prior notice).	
	AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CCEO () Delete ADAMSON, ROBERT 901 YAMATO ROAD #110 BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () Delete LITTLE, KEVIN 901 YAMATO ROAD #110 BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	PCFO (X) Change () Addition LITTLE, KEVIN 901 YAMATO ROAD #110 BOCA RATON, FL 33431	
Title: Name: Address: City-St-Zip:	EV () Delete DONOHOE, PATRICIA 901 YAMATO ROAD #110 BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	CNO (X) Change () Addition DONOHOE, PATRICIA 901 YAMATO ROAD #110 BOCA RATON, FL 33431	
Title: Name: Address: City-St-Zip:	D () Delete ACKERMAN, JOEL 466 LEXINGTON AVE NEW YORK, NY 100173147	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WENSTRUP, DAVID 466 LEXINGTON AVE NEW YORK, NY 100173147	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () Delete WESTOR, DAVID 901 YARATO ROAD #110 BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KEVIN S. LITTLE PCFO 05/01/2007