2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000047131

Entity Name: AFFORDABLE STAFFING, INC.

FILED Mar 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18505 PAULSON DR. UNIT F

PORT CHARLOTTE, FL 33954

Current Mailing Address: New Mailing Address:

4209 FLAMINGO BLVD 766 SIDNEY TERR

PORT CHARLOTTE, FL 33948 PORT CHARLOTTE, FL 33948

FEI Number: 65-1009490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAMMONS, JOHN A BERTUZZI, SHARI M 4209 FLAMINGO BLVD 766 SIDNEY TERR

PORT CHARLOTTE, FL 33948 US PORT CHARLOTTE, FL 33948 US

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: SHARI M BERTUZZI 03/15/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition Name: SAMMONS, JOHN A Name: SAMMONS, JOHN A

 Address:
 4209 FLAMINGO BLVD
 Address:
 1408 SW 31ST TERR

 City-St-Zip:
 PORT CHARLOTTTE, FL 33948
 City-St-Zip:
 CAPE CORAL, FL 33914

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BERTUZZI, SHARI M
 Name:
 BERTUZZI, SHARI M

 Address:
 18505 PAULSON DR.
 Address:
 766 SIDNEY TERR

 City-St-Zip:
 PORT CHARLOTTE, FL 33954
 City-St-Zip:
 PORT CHARLOTTE, FL 33948

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: SHARI M BERTUZZI T 03/15/2005