## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000082424

FILED Apr 13, 2009 Secretary of State

Entity Name: AIRETEL STAFFING, INC. **Current Principal Place of Business: New Principal Place of Business:** 415 MONTGOMERY ROAD **SUITE #125** ALTAMONTE SPRINGS, FL 32714 **New Mailing Address: Current Mailing Address:** PO BOX 915864 LONGWOOD, FL 32791 US FEI Number: 52-2262773 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: TOMASO, RITA M 415 MONTGOMERY ROAD **SUITE #125** ALTAMONTE SPRINGS, FL 32714 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: CFO (X) Change ( ) Addition TOMASO, ROBERT W. Name: Name: TOMASO, RITA M 415 MONTGOMERY ROAD, SUITE #125 415 MONTGOMERY ROAD, SUITE 125 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: SDC Title: SD () Delete (X) Change ( ) Addition Name: TOMASO, RITA, M. Name: TOMASO, RITA M 415 MONTGOMERY ROAD, SUITE #125 415 MONTGOMERY ROAD, SUITE #125 Address: Address: ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: City-St-Zip:

Title: Title: ( ) Change (X) Addition () Delete PCT Name:

TOMASO, ROBERT W Name:

415 MONTGOMERY ROAD, SUITE #125 Address: Address: City-St-Zip: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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: RITA M. TOMASO CEO 04/13/2009