2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075083

Entity Name: DAVRON STAFFING INC.

FILED Feb 16, 2007 Secretary of State

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

3750 GUNN HWY, SUITE 3D 3750 GUNN HIGHWAY TAMPA, FL 33618

3D

TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

3750 GUNN HWY, SUITE 3D 3750 GUNN HIGHWAY TAMPA, FL 33618

TAMPA, FL 33618 US

FEI Number: 59-3737526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COREEN, DAVID COREEN, DAVID 3750 GUNN HWY, SUITE 3D 3750 GUNN HIGHWAY TAMPA, FL 33618 3D TAMPA, FL 33618 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: 02/16/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

WILLIAMS, DOUGLAS COREEN, DAVID Name: Name: Address:

3750 GUNN HWY, #3D 3750 GUNN HIGHWAY SUITE 3D Address:

City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33618 US

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

Name: COREEN, RHONDA Name: COREEN, RHONDA

3750 GUNN HWY, #3D 3750 GUNN HIGHWAY SUITE 3D Address: Address:

TAMPA, FL 33618 TAMPA, FL 33618 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: MD () Delete MD COREEN, DAVID Name: WILLIAMS, DOUG Name:

3750 GUNN HWY 3D 3750 GUNN HIGHWAY SUITE 3D Address: Address:

City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33618 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID COREEN MD 02/16/2007