

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081201

FILED  
May 30, 2006  
Secretary of State

Entity Name: VETOM MEDICAL STAFFING INC.

**Current Principal Place of Business:**

9337 SAVANNAH ESTATES DRIVE  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

9337 SAVANNAH ESTATES DRIVE  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number: 65-1198281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRINITY ACCOUNTING & INSURANCE GROUP, INC  
6151 MIRAMAR PKWY  
SUITE 119  
MIRAMAR, FL 33023 US

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

TRINITY ACCOUNTING & INSURANCE GROUP, INC  
660 N STATE ROAD 7  
SUITE 5A  
PLANTATION, FL 33317 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: ARJUNE RAM

05/30/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: BABU, MARYKUTTY  
Address: 3810 WOODFIELD DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VTD ( ) Delete  
Name: JOSEPH, BABU  
Address: 3810 WOODFIELD DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: BABU, MARYKUTTY  
Address: 9337 SAVANNAH ESTATES DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: VTD (X) Change ( ) Addition  
Name: JOSEPH, BABU  
Address: 9337 SAVANNAH ESTATES DR  
City-St-Zip: LAKE WORTH, FL 33467

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: MARYKUTTY BABU

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05/30/2006

Electronic Signature of Signing Officer or Director

Date