

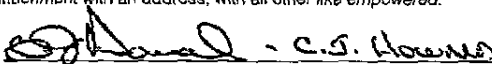


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000058306 <small>1. Entity Name</small> C.L.A.S. STAFF IV, INC			
<small>Principal Place of Business</small> 6302 MANATEE AVE WEST SUITE I BRADENTON, FL 34209		<small>Mailing Address</small> 6302 MANATEE AVE WEST SUITE I BRADENTON, FL 34209	
DO NOT WRITE IN THIS SPACE		 03062006 No Chg-P CR2E034 (11/05)	
<small>4. FEI Number</small> 20-1028474		<small>Applied For</small> <input type="checkbox"/> Not Applicable	
		<small>5. Certificate of Status Desired</small> <input type="checkbox"/> \$8.75 Additional Fee Required	
<small>6. Name and Address of Current Registered Agent</small> HOWARD, CHARLES JR 6302 MANATEE AVE WEST SUITE I BRADENTON, FL 34209		DO NOT WRITE IN THIS SPACE	
<small>8. 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. I am familiar with, and accept the obligations of registered agent.</small>			
<small>SIGNATURE</small> _____ <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small> <small>DATE</small> _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		<small>9. Election Campaign Financing Trust Fund Contribution.</small> <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	P HOWARD, CHARLES P 6302 MANATEE AVE WEST SUITE I BRADENTON, FL 34209		
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<small>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</small>		U000000547997 05/12/06-80046-025 150.00	
SIGNATURE:  C.S. Howard <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/23/2006 941-761-7704 <small>Date</small> <small>Daytime Phone #</small>	