2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000090400

1. Entity Name

AFFORDABLE STAFFING & MANAGEMENT INC

Principal Place of Business

1213 SE 3 AVE

STE 100

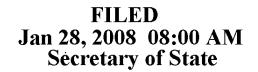
FORT LAUDERDALE, FL 33316

Mailing Address

1213 SE 3 AVE

STE 100

FORT LAUDERDALE, FL 33316





DO NOT WRITE IN THIS SPACE

01102008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1230684

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, ROBERT W 1213 SE 3 AVE **STE 100** FORT LAUDERDALE, FL 33316

DO NOT WRITE IN THIS SPACE

							* 3	
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.								
SIGNATURE						3		
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered in				equired when reinstating)		DATE		
FILE NOW!!! FEE IS \$150,00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contributio			,	\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS				e-19 k	: 4,6			
TITLE	P				i lene	! \ጠብጣሲንጎጎጎጎ .		
NAME	JONES, ROBERT W		. 1 . s	*** **** *****************************	00 O)0008022927 208-80053-0	HC 150 00	
STREET ADDRESS	1213 SE 3 AVE STE 100				027017	เกละฉักกวระก	116 120.00	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316		",			•		
TITLE	VP		•	4 ¹ / ₂	. •	•	. •	

JONES, JANE 1213 SE 3 AVE STE 100 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33316 TITLE JONES, STEVEN G NAME STREET ADDRESS 1213 SE 3 AVE STE 100 CITY-ST-ZIP FORT LAUDERDALE, FL 33316 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE N THIS SPACE

12. I hereby certify that the information supplied with this filing indicated on this report or supplemental report is true and of the corporation or the receiver of trustee empowered to ces not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information ccurate and that my signature shall have the same legal effect as if made under oath: that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or or

SIGNATURE

TITLE NAME STREET ADORESS CITY-ST-7IP