## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000038055

City-St-Zip: TAMPA, FL 33618

Entity Name: AFFINITY PLUS HEALTHCARE STAFFING INC

FILED Feb 26, 2007 Secretary of State

Current F	Principal Place	of Business:	New Principal Place of	New Principal Place of Business:	
11501 CA TAMPA, F	RROLLWOOD FL 33618	DR			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
11501 CA TAMPA, F	RROLLWOOD FL 33618	DR			
FEI Numbei	r: <b>20-24921</b> 65	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
11501 CA	R, JOSHUA E RROLLWOOD FL 33618 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	P ( GITOMER, JOS		Title: ( Name: Address:	) Change ()Addition	

City-St-Zip:

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: JOSHUA GITOMER P 02/26/2007