2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000144378

Entity Name: PROTECH STAFFING OF FLORIDA, INC.

FILED Nov 14, 2007 Secretary of State

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

7216 CHANCERY LN. SUITE 1

ORLANDO, FL 32809 US

Current Mailing Address: New Mailing Address:

7216 CHANCERY LN. SUITE 1

ORLANDO, FL 32809 US

FEI Number: 20-5901915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LECLAIR, VICKIE
6500 WINEGARD ROAD
SUITE #110
ORLANDO, FL 32809 US

LECLAIR, VICKIE
7216 CHANCERY LANE
SUITE 1
ORLANDO, FL 32809 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: 11/14/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRFS (X) Change () Addition MEIER, ROBERT P PRES LECLAIR, VICKIE P PRES Name: Name: 11837 SIR WINSTON WAY 7216 CHANCERY LANE SUITE 1 Address: Address: City-St-Zip: ORLANDO, FL 32824 US City-St-Zip: ORLANDO, FL 32809 US

Title: VΡ Title: VΡ (X) Change () Addition () Delete Name: LECLAIR, VICKIE M V-PRES Name: MEIER. ROBERT P V-PRES 11837 SIR WINSTON WAY 11837 SIR WINSTON WAY Address: Address: ORLANDO, FL 32824 US ORLANDO, FL 32824 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition SEC () Delete SEC LECLAIR, VICKIE M SEC Name: LECLAIR, VICKIE M SEC Name: 11837 SIR WINSTON WAY 7216 CHCANCERY LANE SUITE 1 Address: Address: City-St-Zip: ORLANDO, F 32824 US City-St-Zip: ORLANDO, FL 32809 US

I hereby certify that the information supplied with this filing does not qualify 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: VICKIE LECLAIR P 11/14/2007