

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000011301

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** ASSON & ASSOCIATES STAFFING INC

**Current Principal Place of Business:**

10211 PINES BLVD  
114  
PEMBROKE PINES, FL 33026 US

**New Principal Place of Business:**

**Current Mailing Address:**

10211 PINES BLVD  
114  
PEMBROKE PINES, FL 33026 US

**New Mailing Address:**

**FEI Number:** 27-1861927      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

REID'S INCOME TAX & COMPUTER SERVICE, LLC  
5419 NORTH STATE ROAD 7  
TAMARAC, FL 33319 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: ASSON, TRICIA S  
Address: 8801 SW 13TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: P  
Name: ASSON, JENNIFER  
Address: 8801 SW 13TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33025 US

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER ASSON

P

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date