2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000081389

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SOMERSET, NJ 08873

PRESUTO, CHERYL

1 EXECUTIVE DR STE 130

SOMERSET, NJ 08873

() Delete

CFO

FILED Apr 17, 2009 Secretary of State

Entity Nai	ne: TEAMST	AFF II, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	TIVE DR., SUITET, NJ 08873	ΓE 130					
Current Mailing Address:			New Mailing Address:				
1 EXECUT SOMERSE	TIVE DR., SUITET, NJ 08873	ΓE 130					
FEI Number:	59-3277121	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desire	d()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
1201 HAYS		CE COMPANY 012525 US					
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent,	or both,	
SIGNATU	RE:						
	Electro	nic Signature of Registered Age	nt		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PCEO (DIGIOIA, VICTO 45 BROADWA NEW YORK, N	Y 11TH PL	Title: Name: Address: City-St-Zip:	SEC (DIGIOIA, VIC 45 BROADW/ NEW YORK, I	AY 11TH PL		
Title: Name: Address: City-St-Zip:	S (FILIPPELLI, R 1 EXECUTIVE SOMERSET, N	DR STE 130	Title: Name: Address: City-St-Zip:	CEO (FILIPPELLI, F 1 EXECUTIVE SOMERSET,	DR STE 130		
Title: Name: Address:	D (FILIPPELLI, R 1 EXECUTIVE		Title: Name: Address:	DIR (FILIPPELLI, F 1 EXECUTIVE			

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SOMERSET, NJ 08873

() Change () Addition

SIGNATURE: CHERYL PRESUTO **CFO** 04/17/2009