2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 01, 2006 08:00 AN **DOCUMENT # P95000076208 Secretary of State** 1. Entity Name BUSINESS RESOURCE, INC. Principal Place of Business Mailing Address 1626 BARBER RD. 1626 BARBER RD. SARASOTA, FL 34240 SARASOTA, FL 34240 US 02212006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0613429 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PALERMO, RAMONA DO NOT WRITE 7112 LEEWYN DR. SARASOTA, FL 34240 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title il applicable. (NOTE: Registered Agent signature required when reinstalling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PD THLE PALERMO, RAMONA H MAME Umm000451991 7112 N. LEEWYN STREET ADDRESS 33/11/06-800**08-021 150.0**0 CITY-ST-ZIP SARASOTA, FL 34240 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ALORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the speciever or trusteg empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME O

SIGNATURE:

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