

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000108157

**FILED**  
**Jan 22, 2012**  
**Secretary of State**

**Entity Name:** ALBION STAFFING SOLUTIONS, INC.

**Current Principal Place of Business:**

2520 NW 97 AVE  
STE 110  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

2520 NW 97 AVE  
STE 110  
MIAMI, FL 33172

**New Mailing Address:**

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

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

SANTANGELO, PETER  
2520 NW 97 AVE  
#110  
MIAMI, FL 33172 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: PD  
Name: SANTANGELO, PETER J  
Address: 2520 NW 97 AVE SUITE 110  
City-St-Zip: MIAMI, FL 33172

Title: STD  
Name: TITLEY, ANDREW D  
Address: 2520 NW 97 AVE SUITE 110  
City-St-Zip: MIAMI, FL 33172

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: ANDREW TITLEY

STD

01/22/2012

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

\_\_\_\_\_  
Date