

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Feb 10, 2005 8:00 am**  
**Secretary of State**

02-10-2005 90048 008 \*\*\*150.00

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02022005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P96000039795</b>					
1. Entity Name <b>AEROSTAFF SERVICES OF AMERICA INC.</b>					
Principal Place of Business <b>3 NORTHPOINT DRIVE THIRD FLOOR HOUSTON, TX 77060</b>			Mailing Address <b>3 NORTHPOINT DRIVE THIRD FLOOR HOUSTON, TX 77060</b>		
2. Principal Place of Business <b>21977 E. Wallis Dr.</b>		3. Mailing Address <b>21977 E. Wallis Dr.</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Porter, Texas</b>		City & State <b>Porter, Texas</b>		4. FEI Number <b>65-0674520</b>	
Zip <b>77365</b>		Country <b>U.S.A.</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO LOWERY, DOUGLAS L. <input type="checkbox"/> Delete 1818 DEWBERRY BROOK COURT KINGWOOD, TX 77345				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WITT, TERRY L. <input type="checkbox"/> Delete 25810 HAVEN LAKE DRIVE TOMBALL, TX 77375				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROCCO, JAMES J. <input checked="" type="checkbox"/> Delete 11261 DAMICO LANE CONROE, TX 77303				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO Lowery, Douglas L. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2007 Golden Pond Kingwood, Texas 77345				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplementary 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 receiver or receiver 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.					
SIGNATURE: _____ Date <b>2/2/05</b> 281-999-5544					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					