

ANNUAL REPORT For use by FOREIGN PROFIT CORPORATION								
(Required by Section 911, Act 284, Public Act of 1972)								
The identification number	r assigned by the Bureau is:	801060616						
Annual Report Filing Year:	2022							
1. Corporation Name:								
ALABAMA STAFF, INC.								
<ol> <li>The street address of</li> <li>Resident Agent Name:</li> </ol>		e and the name of the resident agent at that office: NG SERVICE (COMPANY)						
2. Street Address: Apt/Suite/Other:	2900 WEST ROAD STE 500							
City:	EAST LANSING							
State:	MI	Zip Code: 48823						
3. Mailing address of the	corporation's registered office:							
P.O. Box or Street Address:	2900 WEST ROAD STE 500							
Apt/Suite/Other: City:	EAST LANSING							
State:	MI	Zip Code: 48823						

4. Provide the names and business or residence addresses of the corporation's board of directors and its president, treasurer, and secretary:

Title	Name	Residence or Business Address
PRESIDENT	AVI SKLUT	7361 CALHOUN PLACE, SUITE 600, ROCKVILLE, MD 20855 USA
TREASURER	AVI SKLUT	7361 CALHOUN PLACE, SUITE 600, ROCKVILLE, MD 20855 USA
SECRETARY	AVI SKLUT	7361 CALHOUN PLACE, SUITE 600, ROCKVILLE, MD 20855 USA
DIRECTOR	AVI SKLUT	7361 CALHOUN PLACE, SUITE 600, ROCKVILLE, MD 20855 USA

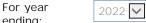
5. Describe the purposes and general nature and kind of business in which the corporation engaged in during the year covered by this report:

PROVIDING EMPLOYEE LEASING SERVICES TO OUR CLIENTS.

6.Enter the apportionment percentage from the most recent filed Michigan tax return:

Total Authorized shares: 100 Most recent apportionment percentage:

0.0000



ending:

Previous attributable shares:	60000	Previous period apportionment percentage:	0.0000	For year ending:	2016			
This document must be signed by an authorized officer or agent: Signed this 29th Day of April, 2022 by:								
Signature		Title	Title	Title if "Other" was selected				
AVI SKLUT		President						
By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act. jm Decline jm Accept								

## MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

## FILING ENDORSEMENT

This is to Certify that the 2022 ANNUAL REPORT

for

ALABAMA STAFF, INC.

*ID Number:* 801060616

received by electronic transmission on April 29, 2022 , is hereby endorsed.

*Filed on* April 29, 2022 , by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 29th day of April, 2022.

Linda '

Linda Clegg, Director Corporations, Securities & Commercial Licensing Bureau