

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

subject to a penalty fee of \$25.00. 1. Corporate ID No.	2. Name of Corporation				
129025	Adecco USA, Inc.				
3. Street Address Principal Business Office 175 Broad Hollow Road			^{City} Melville	State NY	Ζίρ 11747
4. Business Phone No.	•	5. State of Incorporation Delaware		•	•
6. Brief Description of the Character Provision of Temporary Ser	of Business Conducted in Rivices and other Huma	oode tsland an Resource Services			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA		SPACES BEFORE USING	ATTACHMENTS
President Name Theron I. "Tig" Gilliam			Vice President Name Dawn Ehrhart		
Street Address			: Street Address		
175 Broad Hollow Road			175 Broad hollow Rd.		
City Melville	State NY	Ζφ 11747	Cuy Melville	State NY	Zip 11747
Secretary Name George M. Reardon			Treasurer Name Lorelei DePalo		
Street Address 175 Broad Hollow Road			Street Address 175 Broad Hollow Rd		
City Melville	State NY	<i>Zip</i> 11747	City Melville	State NY	^{Ζίρ} 11747
8. NAMES AND ADDRESSES	OF THE DIRECTORS	: ("X" BOX FOR ATI		I SPACES BEFORE USIN	G ATTACHMENTS
Director Name Thereon L "Tie" Cilliam			Ctophon Nolon		
Theron I. "Tig" Gilliam Street Address			Stephen Nolan		
175 Broad Hollow Road			175 Broad Hollow Rd		
City	State	Zip	City	State	Zip
Melville	NY	11747	Melville	NY	11747
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	Спу	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			500	Common	.001
This report must be executed	1.1.10		1		

this report must be executed on behalf of the corporation by the receiver or trustee.

FILED				
· ILLD				
File Date				
Check No. By 6 296				
FOR SECRETARY OF STATE USE ONLY				

Under penalty of perjury, I declare and affirm	•
including any accompanying schedules and st	atements, and that all statements
ontained herein are true and correct.	-1.0100
Day Elilat	2/19/09
Signature	Date
Dawn Ehrhart	
Print or Type Name	
Vice President- Taxes	
T'	

Form 630 Rev. 08/08