

FOR SECRETARY OF STATE USE ONLY

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 2011

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(cord)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000093373	2. Name of Corporation Assignment Ready, Inc.				
3. Street Address Principal Business Office 26651 West Agoura Road			City Calabasas	State CA	^{Zip} 91302-1959
4. Business Phone No. 5. State of Incorporation (818) 878-7900 Delaware					
6. Brief Description of the Character Temporary Help Services	(NAICS: 561320)				
7. NAMES AND ADDRESSE President Name Christina Gibson	S OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) FILL IN S	PACES BEFORE USING	ATTACHMENTS
Street Address 26651 W. Agoura Rd.			Street Address		
City Calabasas	State CA	^{Zip} 91302	City	State	Zip
Secretary Name Nancy Pawar			Treasurer Name Christina Gibson		
Street Address 26651 W. Agoura Rd.			Street Address 26651 W. Agoura Rd.		
City Calabasas	State CA	^{Zip} 91302	<i>Cuy</i> Calabasas	State CA	^{Zip} 91302
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Peter T. Dameris			TACHMENT) TELL IN SPACES BEFORE USING ATTACHMENTS Director Name James L. Brill		
Street Address			Street Address 26651 W. Agoura Rd.		
26651 W. Agoura Rd.	State	Zip	City	State State	Zip
Calabasas	CA	91302	Calabasas	CA	91302
Director Name	••••••		Director Name		
Street Address			Street Address		
Gity	State	Zip	City	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
			1000	Common	\$0.0001
This report must be execute this report must be executed	d on behalf of the corp	poration by an authorized oration by the receiver	ed representative. If the coor trustee.	orporation is in the hand	s of a receiver or trustee,
FILED			Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct.		
File Date FEB 2.2	2011		Maney	Pauli 2	1/21/11
I ma	1 ()		Signature		. Date

Nancy Pawar Print or Type Name Secretary

Title