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FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 15 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name M78581 (9) MANAGEMENT RECRUITERS OF NORTH PINELLAS COUNTY. Principal Place of Business Mailing Address 1305 S. MICHIGAN P.O. BOX 7711 CLEARWATER FL -34014 CLEARWATER FL 34618 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 04/25/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 58-1787570 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund. Contribution 28 23 Added to Fees Country Country This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STROHAUER, GARY N. 1150 CLEVELAND ST 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 300 83 CLEARWATER FL 34615. 84 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of fice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition NAME GLEASON, HELEN 1.2 NAME P.O. BOX 7711 N/A STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 2.1 TITLE WILL, ADRIAN G. NAME 2.2 NAME 1520 GULF BLVD #1703 STREET ADDRESS 2.3 STREET ADDRESS CLEARWATER FL CITY - ST- ZIP 2. 4 CITY - ST-ZIP ☐ DELETE 3.1 TITLE Change Addition TITLE STD NAME 3.2 NAME Novak, Gertrude STREET ADDRESS 4901 Mc Anulty Drive Pittsburgh, PA 15236 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 8.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: