## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

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**FILED** 

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000041425 (6)

AD-VANCE PERSONNEL SERVICES OF FLORIDA, INC.

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Principal Plac	ce of Business	Mailing Address	Mailing Address					i <b>se</b> it viool kon ofele	
6519 14TH STR W UNIT 129 BRADENTON FL 34207 US		6513 14TH ST. W UNIT 129 BRADENTON EL 242							
						Ī	3. Date Incorporated or Qualified		
2. Principal F	Place of Business	28. Mailing Address 26					4. FEI Number 65-0589808		Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
City & State		City & State	City & State				6. Election Campaign Financing	<b>\$5.</b>	00 May Be
23 Zip	Country	28     Zip		ountry			Trust Fund Contribution  8. This corporation has liability for	intangible tax und	er s. 199.032,
24	[25]	29	30					.] Yes     L] No	
<u> </u>	9. Name and Address of Curre	eni Registered Agent	<del></del>	81	Name		ID. Name and Address of New Re	gisterea Agent	····
SUN 841	NSERI, BRION 6 SYLVAN WOODS DRIVE			82			(P.O. Box Number is Not Acceptal	) o\	
	RASOTA FL 34243			83			, (i .e. box Nongoli la Not Novopial		
						·			
-				84	City			FL  85   7	Zip Code
I office or ⊢	to the provisions of Sections 607.05 registered agent, or both, in the Sta am tamiliar with, and accept the obli	ite of Florida. Such change:	was authoriz	ed by	the corn	corpora poration	ation submits this statement for the is board of directors. I hereby acce	ourpose of changing the appointment	ng its registered as registered
SIGNATURE	Signature, typod or printed name of registered a	agent and title if applicable	(NOTE: Registe	ned Age	ni sionalure	required w	theo reinstalino)	DATE	···-
12.		ND DIRECTORS	13			7040.00	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	D	DELET	1.1	TITLE				☐ Chan	ge Addition
NAME	SUNSERI, BRION	_	1.2	NAME					
STREET ADDRESS	8416 SYLVAN WOODS DRIV	/E			ADDRESS				
CITY-\$T-ZIP TITLE	SARASOTA FL 34243	DELET		CITY-S TITLE	1- <i>2</i> 1P			Chan	ge Addition
NAME		_ vice.	f	NAME	1			C Cian	do CT Vanitar I
STREET ADDRESS					ADDRESS				
CITY-\$T-ZIP			2. 4	CITY-S	31 - ZIP				
TITLE		DELET	3.1	TITLE				Chan	ge 🔲 Addition
NAME .	1		Į	NAME					ļ
STREET ADDRESS			l l		ADDRESS	İ			
CITY-\$T-ZIP		DELETI		CITY-S TITLE	1 - 219			Chan	ge Addition
NAME		<del></del> :		NAME				_	
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-\$1-ZIP	<u></u>			CITY-S	1 - ZIP				
TITLE	ļ	DELETI	5.1	TITLE		j		☐ Chan	ge Addition
NAME		בַ טנננוו	•						
OTOCCT ADDDCOD		ر ا		NAME	ADDRESS				
STREET ADDRESS		ن ماندان	5.3	STREET	ADDRESS :				
STREET ADDRESS CITY-ST-ZIP TITLE		DELETI	5.3 5.4					☐ Chan	ge Addition
CITY-\$T-ZIP			5.3 5.4 6.1	STREET CITY-S				☐ Chan	ge Addition

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

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