SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # P95000089070 (3) SUITABLE EMPLOYMENT MANAGEMENT GROUP, INC. Mailing Address Principal Place of Business **13700 58TH STREET** 13700 58TH STREET SUITE 208 SUITE 208 CLEARWATER FL 34620 **CLEARWATER FL 34620** 3a. Date of Last Report 3. Date Incorporated or Qualified 11/20/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-344465 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032 Country Country Zio Yes [No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SAUNOOKE, ROBERT O Street Address (P.O. Box Number is Not Acceptable) 13700 58TH STREET 82 **SUITE 208** 83 **CLEARWATER FL 34620** Zip Code 85 84 City 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 office 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when redictation) Signature, typied or printed name of a gestered agent and the if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)13. OFFICERS AND DIRECTORS 12. Change Addition DELETE 1 1 TITLE TITLE CR2E034 LINDEMANN, SHARON O 1.2 NAME NAME 13700 58TH STREET, SUITE 208 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34620** 1.4 CHTY - ST-ZIP CITY - ST - ZIP Change Addition DELETE 2.1 1111.6 VD TITLE LEE, ROBERT J 2.2 NAME NAME 13700 58TH STREET, SUITE 208 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34620** 2 4 CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1.1ITLE SD TITLE 3 2 NAME SAUNOOKE, ROBERT O NAME 13700 58TH STREET, SUITE 208 3.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34620** 34 CITY - ST - ZIP CITY-ST-ZIP Change ____ Addition DELETE 4.1 TI*LE ŤD TITLE 4 2 NAME PARDUS, HELEN NAME 13700 58TH STREET, SUITE 208 4.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34620** 4.4 C(1Y - ST - Z)P CITY-ST-ZIP Change DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP 500001883955 U -07/03/96--01085--004 DELETE 6 1 TITLE TITLE 6.2 NAME NAME ***675.00 6.3 STHEET ADDRESS STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

NING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 are an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and that my name appears in Block 13 if changed, or on an attachment with an address 4/24/96