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Feb 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S83267 (2)
1. Corporation Name
FLORIDA LABOR SERVICES, INC.



Principal Place of Business: 1469 N. MAGNOLIA, #K OCALA FL 34478 US
Mailing Address: P. O. BOX 4818 OCALA FL 34478-4818 US

3. Date Incorporated or Qualified: 09/26/1991
3a. Date of Last Report: 01/29/1996

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Lakeland, Florida 24 Zip: 33802-0851 25 Country: US
2a. Mailing Address: 26 P. O. Box 851 27 Suite, Apt. #, etc. 28 City & State: 29 Lakeland, Florida 30 Zip: 33802-0851 31 Country: US
4. FEI Number: 59-3085350 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: DOBBINS, L G JR 601 E LIME STREET LAKELAND FL 33802
10. Name and Address of New Registered Agent: 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL

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: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE:

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include names, titles, and addresses for L. G. Dobbins, Jr. and Melody M. Dobbins.

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 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, unchanged, or on an amendment with an address.

SIGNATURE: L. G. Dobbins, Jr. 1-15-97 (941) 688-7731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)