FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

Γ	OCL	JM	E١	T	#
	C1				

1. Corporation	NDABLE TEMPS, INC.	Mailing Address 119 NE 14TH ST MIAMI FL 33132						
				3. Date Incorporated or Qualified	3a. Date of Last Report			
2. Principal Pk	ace of Business	2a. Mailing Address		05/30/1980 4. FEI Number	01/31/1995			
21		26		59-2040175	Applied For Not Applicable			
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	· · · · · · · · · · · · · · · · · · ·	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be			
Ζιρ 24]	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes X Yes	Added to Fees ntangithe tax under s 199,032,			
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R				
RITTER, GREGORY J. C/O RITTER & KISLOW			81 Name 82 Street Add	81 Name				
7000 W	. Palmetto Park Rd., Suite Raton FL 33433	÷ 400	83 84 City	III CK º CHUS/D	OF 7th Code			
SIGNATURE _	o the provisions of Sections 607.050 ad agent, or both, in the State of Floin, and accept the obligations of, Sec			ration submits this statement for the purp ard of directors. I hereby accept the appo	pose of changing its registered office introent as registered agent. I am			
12.		ND DIRECTORS	OTE: Registered Agent signature require 13.	od when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12 Change Addition Change Addition			
MULE	PTD	☐ DELETE	1 STOLE	ADDITIONS/CHANGES TO OFFIC	Change Addition			
IAME	KAPLAN, EDWARD 10346 NW 4 ST		. 1.2 NAME					
URFEL ADDRESS UTY-ST ZIP	CORAL SPRGS, FL 00000		1.3 STREET ADDRESS.					
II.F	VD	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE					
AME	GRUMAN, MIN		2 2 NAME		Change Addition			
IREE1 ADDRESS	5860 NW 44TH ST #415		2 3 STREET ADDRESS					
TY-\$1-706	LAUDERHILL FL		2 4 City-St-Zip					
IILF	SD KADI AM HIDITU	☐ DELETE	3. 1 TIFLE		☐ Change ☐ Addition			
AME THEET ADDRESS	KAPLAN, JUDITH 10346 NW 4TH ST		3 2 NAME					
DY ST ZIP	CORAL SPRINGS FL		3.9. STREET ADDRESS					
1ft	W ALCUIDO I P	DELETE	3 4 C/TY-ST-ZIP 4 1 TITLE					
AM)			4 2 NAME		Change Addition			
FEET ADDRESS			4 3 STREET ADDRESS					
Y-ST ZIP			4 4 CITY - ST - ZIP					
LF		☐ DELETE	5 1 TITLE		Change Addition			
.Wi			5 2 NAME					
BEEF ADDRESS			5 3 STREET ADDRESS					
14 - 51 - 21F LE		FI Prince	54 CITY-ST-ZIP					
MH		DETELE	6 1 TITLE		Change Addition			
RECLADURESS			62 NAME					
IY-SI-Zir			6 3 STREET ADDRESS					
	certify that the information supplied	with this filma is voluntarily fund	6 4 CITY - ST - ZIP	or the exemption stated in Section 119.07				

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Judith Hablan SIGNATURE AND TYPED OR PRINTER NAME OF BIGNING OFFICER OR DIRECTOR

(305)374-5161