2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SECRETARY UP 3 JUNE STATE DIVISION OF CORPORATIONS DI OCT - L. AH 8: L.I SECRETARY UP 3 JUNE STATE BROUGHTON R. 9005 DI OCT - L. AH 8: L.I DI OCT - L. AH 8	DOCU 1. Entity Nan	MENT-# B930)000 0 0392	- مساسمة	er's		Fu FN	W10/4	1068 AF	
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City & State Country Country S. Certificate of Statute Desired Section Desired Section	2. Principal Place of Business 3. Mailing Address									
Street Address of Current Registered Agent CT CORPORATION SYSTEM 20 S. PINE SLAND RD. PLANTATION FL. 33324 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 30 S. PINE SLAND RD. PLANTATION FL. 33324 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 30 S. PINE SLAND RD. PLANTATION FL. 33324 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 30 S. PINE SLAND RD. PLANTATION FL. 33324 10 S. Capital Contributions on the State of Florida. SIGNATURE 30 S. Capital Contributions on the State of Florida. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be lifed to change agencial partner. CENERAL PARTNER FLORIDATION 19. ADDRESS CHANGES CHILY STAFF LEASING CITY-SI-2P COUMBRY NOWE STREET ADDRESS CITY-SI-2P CITY-SI-2P CITY-SI-2P CITY-SI-2P STREET ADDRESS CITY-SI-2P CITY-SI-2P STREET ADDRESS CITY-SI-2P STREET A	Suite, Apt. #, etc. Suite, Apt. #, 6			<u>. </u>		DO NOT WRITE IN THIS SPACE				
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Plonda. SIGNATURE 8. Capala Contributions 25 Shown on rood. \$11,339,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,339,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,339,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,339,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,039,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,000.00 10. Anount of Capital Contributions 25 Shown on rood. \$11,000.00 10.	City & State		City & State	City & State		4. FEI Number	65-0442051			
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indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes	14. I hereby of indicated	on this report is true and accurate a	and that my signature shall have t	the same	legal effect as if ma	ction 119.07(3)(i), ade under oath: th	Florida Statutes. I further on at I am a General Partner	pertify that the information of the limited partnership	n o or	

4(27/01 Date

941-748-4540 Daytime Phone #