

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B99000000103

1. Entity Name

TEMP FORCE, L.P.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -1 PM 12:06

mf

Principal Place of Business

2015 SOUTH PARK PLACE
ATLANTA GA 30339

Mailing Address

2015 SOUTH PARK PLACE
ATLANTA GA 30339-2089

2. Principal Place of Business

3. Mailing Address

TEMP FORCE, L.P.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

177 CROSSWAYS PARK DRIVE

City & State

City & State
WOODBURY NY

4. FEI Number

58-2422206

Applied For

Not Applicable

Zip

Country

Zip

11797

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$999.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$999.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

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 filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # M99000000142
NAME RANDSTAD GENERAL PARTNER (US) LLC
STREET ADDRESS 2015 SOUTH PARK PLACE
CITY - ST - ZIP ATLANTA GA 30339

STREET ADDRESS

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14. I 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 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

SIGNATURE:

MC

ROBERT CALABRO, VP-TAXES

4/6/02

(516)682-1400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FOR RANDSTAD

Date

Daytime Phone #

GENERAL PARTNER (US) LLC