

E NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90951 017 ***150.00

DOCUMENT # F96000006768

1. Corporation Name

~~OLSTEN STAFFING SERVICES VII, INC.~~

DLSTEN STAFFING SERVICES CORP.

N/C
4/11/2000

Principal Place of Business

175 BROAD HOLLOW RD
MELVILLE NY 11747

Mailing Address

175 BROAD HOLLOW RD
MELVILLE NY 11747

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1996

4. FEI Number

11-3351445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BLUMBERG EXCELSIOR CORPORATE SERVICES, INC
4435 OLD WINTER GARDEN ROAD
ORLANDO FL 32802

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME D
LIGURI, F N
STREET ADDRESS 175 BROAD HOLLOW RD
CITY-ST-ZIP MELVILLE NY 11747

TITLE ☒ DELETE

NAME P
PISKE, R A
STREET ADDRESS 175 BROAD HOLLOW RD
CITY-ST-ZIP MELVILLE NY 11747

TITLE ☐ DELETE

NAME S
CANTANTINI, W P
STREET ADDRESS 175 BROAD HOLLOW RD
CITY-ST-ZIP MELVILLE NY 11747

TITLE ☐ DELETE

NAME T
PUGUNI, A J
STREET ADDRESS 175 BROAD HOLLOW RD
CITY-ST-ZIP MELVILLE NY 11747

TITLE ☐ DELETE

NAME V
LADEROUTE, L
STREET ADDRESS 175 BROAD HOLLOW RD
CITY-ST-ZIP MELVILLE NY 11747

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D
Stuart Disten
175 Broad Hollow Rd
Melville NY 11747

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P
Ronald A. Malone
175 Broad Hollow Rd
Melville NY 11747

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

WILLIAM P. COSTANTINI

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Signature: [Handwritten Signature] L. Laderoute Jr 4/20/99 516-844-7266
Date: 4/28/00

To

FLA DEPT of TAXATION

P.O. Box 1500

TALLAHASSEE, FL 32302

From

Attachment
100861 ~~100861~~
Olsten Staffing Services
175 Broad Hollow Road
Melville, N.Y. 11747-8905
#F960000006768
Tax Department

SUBJECT

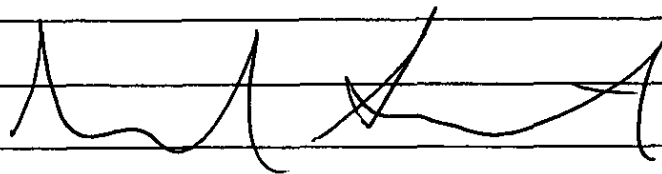
FOLD HERE

DATE

4/18/10

WE DID NOT RECEIVE THE ORIGINAL FORMS
AND WE ARE NOW SENDING YOU LAST YEAR
FORMS AND SIGNED & DATED TODAY.

THANK YOU



BERNARD SILVERSTEIN 516-844-7125

ALAN WEISS

516-844-7135

SIGNED