2003 FOR PROFIT CORPORATION

FIÏED UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F96000006768 03 JUN 28 AM 8: 36 OLSTEN STAFFING SERVICES CORP. SECHETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 175 BROAD HOLLOW RD 175 BROAD HOLLOW RD MELVILLE, NY 11747 MELVILLE, NY 11747 2. Principal Place of Business 3. Mailing Address 175 Broad Hollow Rd Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Tax Dep Applied For City & State City & State 4. FEI Number 11-3351445 Not Applicable Country Ζlp Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **CT CORPORATION SYSTEM** 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number Is Not Acceptable) PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. . (NOTE: Registered Agentsignature required when reinstating) DATE FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 3R2E034 (10/02) TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HEIDE-POND, DEBORAH NAME 900021084639 175 BROOD HOLLOW RD STREET ADDRESS STREET ADDRESS 06/23/03--01100--007 **550.00 CITY-ST-ZP MELVILLE, NY 11747 COY-ST-ZIP TITLE **CFOD** Delete 1ffle ☐ Change ☐ Addition EATON, MARKLD R NAME NAME STREET ADDRESS 175 BROAD HOLLOW ROAD STREET ADDRESS CITY-ST-2P MELVILLE, NY 11747 CITY-ST-ZIP TITLE Delete TITLE Change **→** Addition uacanit NAME GRIPPA, MAUREEN M NAME STREET ADDRESS 175 BROAD HOLLOW RD STREET ADDRESS CITY-ST-2P MELVILLE, NY 11747 Cff y - s1 - 21P ☐ Delete TITLE ☐ Change ☐ Addition TITLE SMALHEISER, HARVEY NAME NAME STREET ADDRESS 175 BROAD HOLLOW RD STREET ADDRESS CITY-ST-ZIP MELVILLE, NY 11747 CITY_ST-7(P VPS TITLE ☐ Delete TITLE . Change ■ Addition WASHINGTON, JYRL NAME NAME STREET ADDRESS 175 BROAD HOLLOW RD STREET ADDRESS CITY-ST-ZP MELVILLE, NY 11747 COY-ST-ZIP – 🗌 Delete TITLE TALE KARABELAS, DIANA NAME NAME reason as our proper 175 BROAD HOLLOW ROAD STREET ADDRESS STREET ADDRESS ETROPICA HISTERIAN CITY-ST-ZP MELVILLE, NY 11747 CRY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3XI), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Harvey Smalleiser signature and typed or printed name of signature of director

SIGNATURE: