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FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000001824 (8)

1. Corporation Name

PERSONNEL STAFFING SERVICES LTD., INC.



Principal Place of Business
586 NORTH FRENCH ROAD
EAST AMHERST NY 14228

Mailing Address
586 NORTH FRENCH ROAD
EAST AMHERST NY 14228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/09/1997

2. Principal Place of Business
21 636 N. French Rd.

2a. Mailing Address
26 636 N. French Rd.

4. FEI Number
16-1516632

Applied For
Not Applicable

Suite, Apt. #, etc.
22 Suite 3

Suite, Apt. #, etc.
27 Suite 3

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

City & State
23 Amherst, NY

City & State
28 Amherst, NY

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

Zip Country
24 14228 25 USA

Zip Country
29 14228 30 USA

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME PT
STREET ADDRESS TENCZA, KENNETH F
CITY-ST-ZIP 586 NORTH FRENCH ROAD
EAST AMHERST NY 14228 ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME VS
STREET ADDRESS LUDDERS, STEPHEN F
CITY-ST-ZIP 586 NORTH FRENCH ROAD
EAST AMHERST NY 14228 ☐ DELETE

2.1 TITLE
2.2 NAME P
2.3 STREET ADDRESS Luadders, Stephen F.
2.4 CITY-ST-ZIP 636 North French Rd. Suite 3
Amherst, NY 14228 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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.

CR2E034 (10/97)