

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000003799 (0)

1. Corporation Name

INTERIM CAREER SERVICES INC.



Principal Place of Business

2050 SPECTRUM BLVD.
FT LAUDERDALE FL 33309

Mailing Address

2050 SPECTRUM BLVD.
FT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/21/1997	
21		26		4. FEI Number 65-0731932	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29			

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD/ceo
NAME	MARCY, RAYMOND	1.2 NAME	
STREET ADDRESS	2050 SPECTRUM BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	VP/cfo
NAME	KRAUSE, ROY G	2.2 NAME	
STREET ADDRESS	2050 SPECTRUM BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	
NAME	SMITH, JOHN B	3.2 NAME	
STREET ADDRESS	2050 SPECTRUM BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	T
NAME	HAGGARD, PAUL	4.2 NAME	Shannon C. Allen
STREET ADDRESS	2050 SPECTRUM BLVD.	4.3 STREET ADDRESS	2050 spectrum Blvd.
CITY-ST-ZIP	FT LAUDERDALE FL 33309	4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309
TITLE	DC	5.1 TITLE	V/D
NAME	SORENSEN, ALLAN C	5.2 NAME	Robert E. Livonius
STREET ADDRESS	2050 SPECTRUM BLVD.	5.3 STREET ADDRESS	2050 spectrum Blvd.
CITY-ST-ZIP	FT LAUDERDALE FL 33309	5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309
TITLE	P	6.1 TITLE	V
NAME	THOMAS, LANCE	6.2 NAME	Mark Smith
STREET ADDRESS	2050 SPECTRUM BLVD.	6.3 STREET ADDRESS	2050 spectrum Blvd.
CITY-ST-ZIP	FT LAUDERDALE FL 33309	6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309

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.

SIGNATURE:

MARCY R. MARCY

05/04/98

CR2E034 (10/97)