

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

001379

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # F97000006072

1. Corporation Name

~~INTERNATIONAL PERSONNEL RESOURCES, LTD. INCORPORATED~~
INOVIS EMPLOYEE SERVICES, INC.

Principal Place of Business

1655 PHOENIX BOULEVARD SUITE 4
COLLEGE PARK GA 30349

Mailing Address

1655 PHOENIX BOULEVARD SUITE 4
COLLEGE PARK GA 30349

2. Principal Place of Business

21 4501 Circle 75 Pkwy., # B-2200
Suite, Apt. #, etc.

2a. Mailing Address

26 4501 Circle 75 Pkwy., # B-2200
Suite, Apt. #, etc.

City & State

23 Atlanta, GA

City & State

28 Atlanta, GA

Zip

24 30339

Country

25 USA

Zip

29 30339

Country

30 USA

9. Name and Address of Current 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: For Registered Agent Signature, type or print name of agent.)

DATE

12. OFFICERS AND DIRECTORS

TITLE [] DELETE

NAME
HOLTSFORD, ROBERT P
STREET ADDRESS
2787 LANDSDOWNE LANE
CITY-STATE-ZIP
ATLANTA GA 30339

TITLE [] DELETE

NAME
BOYD, VALERIE
STREET ADDRESS
15041 NORTH
CITY-STATE-ZIP
NAPLES FL 34102

TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE [] DELETE

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CITY-STATE-ZIP

TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-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

Valerie Boyd

Valerie Boyd

2-24-99

770-541-2500

FILED
99 MAR -3 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FL 32304



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1997

4. FEI Number

58-2120397

Applied For
Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

[]

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

[]

Yes

X

No

10. Name and Address of New Registered Agent

CR2E034 (11/98)