## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION . ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## H20911 **DOCUMENT #**

(4)

**FILED** Apr 30 1996 8:00 am Secretary of State

THE VINCAM GROUP, INC	<b>)</b> ,	
Principal Place of Business	Mailing Address	

2850 DOUGLAS RD. CORAL GABLES FL 33134			2850 DOUGLAS RD. CORAL GABLES FL 33134								
								Incorporated or Qualified /10/1984	3a. Date of Las 05/01/		
	lace of Business		2a. Mailing Add	ess			4. FEI N			Applied For	
21	H		26	·····			5	9-2452823		Not Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certifi	icate of Status Desired	\$8.75 Additional Fee Required		
City & State	e		City & State	City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Ζφ <b>24</b>	25 Co	Zip <b>29</b>	30]				This corporation has liability for intangible tax under s 199.032,     Florida Statutes				
<del></del>	9. Name and Ac	dress of Current	Registered Agent				10. Name	e and Address of New F			
2850 DC CORAL (	, CHRISTINA D., E DUGLAS RD. GABLES FL 33134 to the provisions of S red agent, or both in	ections 607,0502	and 607, 1508, Florid	a Statutes,	81 82 83 84 the above	Street A	2850 Doug Coral Gab	k Number is Not Acceptal glas Road	FL  85	Zip Code 33134 ts registered office	
familiar wit	th, and accept the ob	oligations of, Section	on 607.0506, Florida <b>Willi</b>	Statutes.	Dy the COIL	oranon's D	ciate Co	s. I hereby accept the app	ointment as registe	red agent. I am	
	Signature, typico or prioted n		The same of the sa	(NÓTE	Registered Age	it signature req	inii edi. Mil eri reinstating)		4/24/96 DATE		
12.	T. T.	OFFICERS AND			13.		ADDIT	IONS/CHANGES TO OFF	ICERS AND DIREC	TORS IN 12	
TITLE	TD CANOLIET 104	NP: NI	DELI	ETE.	1.1 TITLE	V	ice Pres	ident	<b>◯</b> ★Chan	ge 🔲 Addition	
NAME	SANCHEZ, JOS				1.2 NAME	J	Jose M. S	anchez			
STREET ADDRESS	2850 DOUGLAS				13 STHEE	ADDRESS 2	2850 Doug	las Road			
CITY-S1-7P	CORAL GABLE	S FL 33134			14 C/TY-5			les, FL 33134			
TILE	DP CALADDICAC	0401004	☐ DELE	TE	2. 1 TITLE		resident		Chang	ge []] Addition	
NAME	SALADRIGAS, I				2.2 NAME			Saladrigas			
STREET ADDRESS	2850 DOUGLAS				2.3 STREET	ADDRESS 2	850 Doug	las Road			
CITY-ST-ZIP	CORAL GABLE	5 FL 33134	F-1		24 CITY-5	1-ZIP C	oral Gab	les, FL 33134			
TITLE	S NAPPIC CURIC	TIMA D	☐ DELE	TE	3. 1 TITLE	T	reasurer	& Secretary	Chang	ge 🖵 Addition	
NAME	HARRIS, CHRIS				3.2 NAME		artin J.				
STREET ADDRESS	2850 DOUGLAS CORAL GABLE				3.3 STREE	ADDRESS 2	850 Doug	lag Road			
CITY-ST-ZIP TITLE	OOTAL GADLE	5 FL 33134	fra nar	T.	3.4 CITY- S	I-ZIP C	oral Gab.	les, FL 33134			
NAME			☐ DELE	16	4.1 TITLE			Secretary	☐ Chang	je 🔽 Addition	
					42 NAME		illiam F				
STREET ADDRESS					43 STREET	ADDRESS 2	850 Doug:	las Road			
CITY-SI-7IP			F3 brut	TC	4 4 CITY-S	T-ZIP C	oral Cab	les, FL 33134			
NAME			DELE	I C	5 1 TITLE			·	☐ Chang	e 🔲 Addition	
J					5.2 NAME					I.	
STREET ADDRESS					5.3 STREET		771	nnnn toe	1 4 man	٧ /	
CITY-ST-ZIP TITLE		······································	C Prin	76	5.4 CITY - S	T-ZIP	J 4	0000180 <del>04/30/960</del> 11	リルミ(だ) / 11==003	1	
NAME			☐ DELE	) T.	6.1 TITLE		94:9	**200.00	II UE) (Chang	e 🗌 Addition	
					6.2 NAME		*****	· ··coos ots		/,	
					<ul> <li>C A 610617</li> </ul>	transon				``	
STREET ADDRESS CITY-ST-ZIP					6.3 STREET	AUDRESS				$\nu$	

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 the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name flanged, or on mattachment with an address.

**SIGNATURE:** 

4/24/96

Date:

(305) 460-2350

Daytime Phone #