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Feb 26, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # H25724
 1. Corporation Name
VINCAM HUMAN RESOURCES, INC. I

Principal Place of Business: 9040 SUNSET DR. #70 MIAMI FL 33173-3466
 Mailing Address: 2850 DOUGLAS RD. CORAL GABLES FL 33134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 10200 Sunset Dr. Suite, Apt. #, etc. 22
 City & State: 23 Miami, FL
 Zip: 24 33173 Country: 25 Miami-Dade

3. Date Incorporated or Qualified: 10/11/1984
 4. FEI Number: 59-2452322 Applied For: Not Applicable
 5. Certificate of Status Desired: \$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 No

9. Name and Address of Current Registered Agent
ELIZABETH J MARSTON
2850 DOUGLAS ROAD
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable): Same as above
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	CEO	<input type="checkbox"/> DELETE
NAME	SALADRIGAS, CARLOS A.	
STREET ADDRESS	2850 DOUGLAS RD.	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	SANCHEZ, JOSE M.	
STREET ADDRESS	2850 DOUGLAS RD.	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	JOHN T CARLEN	
STREET ADDRESS	2850 DOUGLAS ROAD	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	TS	<input type="checkbox"/> DELETE
NAME	PEREZ, MARTIN	
STREET ADDRESS	2850 DOUGLAS RD.	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	CARLOS A RODRIGUEZ	
STREET ADDRESS	2850 DOUGLAS ROAD	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ELIZABETH J MARSTON	
STREET ADDRESS	2850 DOUGLAS ROAD	
CITY-ST-ZIP	CORAL GABLES FL 33134	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	} Same as above	
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	} Same as above	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	} Same as above	
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	} Same as above	
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS	} Same as above	
6.4 CITY-ST-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: William F. Cueto Date: _____ Daytime Phone #: (305) 630-1000

CR2E034 (1/98)