

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

**APPROVED  
AND  
FILED**

05 MAY -1 AM 8:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **H25844** (2)

1. Corporation Name

**VINCAM HUMAN RESOURCES, INC. IV**

Principal Place of Business

Mailing Address

2850 DOUGLAS RD.  
CORAL GABLES FL 33134

2850 DOUGLAS RD.  
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/11/1984** 3a. Date of Last Report **04/29/1994**

4. FEI Number **59-2452323** 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

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRIS, CHRISTINA D., ESQ.  
2850 DOUGLAS RD.  
CORAL GABLES FL 33134

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 re-electing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **TD**  
NAME **SALADRIGAS, CARLOS A.**  
STREET ADDRESS **2850 DOUGLAS RD.**  
CITY - ST - ZIP **CORAL GABLES FL 33134**

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

Change  Addition

TITLE **PD**  
NAME **SANCHEZ, JOSE M.**  
STREET ADDRESS **2850 DOUGLAS RD.**  
CITY - ST - ZIP **CORAL GABLES FL 33134**

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

Change  Addition

\*\*\*2000.00 \*\*\*\*200.00

TITLE **S**  
NAME **HARRIS, CHRISTINA D. ESQ**  
STREET ADDRESS **2850 DOUGLAS RD.**  
CITY - ST - ZIP **CORAL GABLES FL 33134**

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

Change  Addition

200001498132

05/24/95-01952-002

\*\*\*2000.00 \*\*\*\*200.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

Change  Addition

**REMITTED BY MAY 1**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

Change  Addition

T.S. 5/19/95

SIGNATURE:

**JOSE M. SANCHEZ**

5/16/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

System Page 1