

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J78073

(0)

1. Corporation Name

SUN COAST STAFFING, INC.

Principal Place of Business

4330 WEST CYPRESS ST.  
STE. #101  
TAMPA FL 33607  
US

Mailing Address

4330 WEST CYPRESS ST.  
STE. #101  
TAMPA FL 33607-4153  
US



3. Date Incorporated or Qualified

06/17/1987

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2859184

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. 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

23 Zip Country

28 Zip Country

24

29

25

30

9. Name and Address of Current Registered Agent

BROOKS, MICHAEL L.  
437 E MONROE ST  
SUITE 202  
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

BURDEN, BRIAN A. ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

815 W. Verne St., Suite D

83

84 City

Tampa, FL

FL

85 Zip Code

33606

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

*Brian A. Burden*

(NOTE: Registered Agent signature required when reinstating)

4/19/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CD  
STREET ADDRESS ENTIN, GEORGE D.  
CITY-ST-ZIP 5203 BAYSHORE BLVD. #4  
TAMPA FL 33611

TITLE ☒ DELETE

NAME VD  
STREET ADDRESS LONG, JANE A.  
CITY-ST-ZIP 7930 BAY POINTE DR. #B-23  
TAMPA FL 33615

TITLE ☐ DELETE

NAME D  
STREET ADDRESS SIMERLY, JULIAN C JR  
CITY-ST-ZIP 16120 S.W. 76TH AVE.  
SOUTH MIAMI FL 33157

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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:

*George D. Entin*

4/15/97

813-875-3511

CR2E034 (9/96)