

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

FILED
Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K33208** (5)
1. Corporation Name
LABOR FOR HIRE, INC.



Principal Place of Business 861 NE 44TH STREET POMPAÑO BEACH FL 33064 US	Mailing Address P.O. BOX 50462 LIGHTHOUSE POINT FL 33074-0462 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/09/1988	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0075897		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BERSTEIN, DAYTON 863 NE 44TH STREET POMPAÑO BEACH FL 33064		10. Name and Address of New Registered Agent	
		81 Name Dayton Bernstein	
		82 Street Address (P.O. Box Number is Not Acceptable) 861 NE 44th Street	
		83	
		84 City Pompano Beach FL 85 Zip Code 33064	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COATH, JAMES	1.2 NAME	COATH, JAMES
STREET ADDRESS	863 N.E. 44TH STREET	1.3 STREET ADDRESS	861 NE 44TH STREET
CITY-ST-ZIP	POMPAÑO BEACH FL 33064	1.4 CITY-ST-ZIP	POMPAÑO BEACH, FL. 33064 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	
NAME	BERNSTEIN, EILEEN	2.2 NAME	
STREET ADDRESS	6317C GRAYCLIFF DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COATH, CARYN	3.2 NAME	COATH, CARYN
STREET ADDRESS	8159 MIZNER LANE	3.3 STREET ADDRESS	861 NE 44TH STREET
CITY-ST-ZIP	BOCA RATON FL 33496	3.4 CITY-ST-ZIP	POMPAÑO BEACH, FL. 33064 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLSON, HOLLY	4.2 NAME	WILLSON, HOLLY
STREET ADDRESS	863 N.E. 44TH STREET	4.3 STREET ADDRESS	861 NE 44TH STREET
CITY-ST-ZIP	POMPAÑO BEACH FL 33064	4.4 CITY-ST-ZIP	POMPAÑO BEACH, FL. 33064 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNSTEIN, DAYTON	5.2 NAME	BERNSTEIN, DAYTON
STREET ADDRESS	863 NE 44TH STREET	5.3 STREET ADDRESS	861 NE 44TH STREET
CITY-ST-ZIP	POMPAÑO BEACH FL 33064	5.4 CITY-ST-ZIP	POMPAÑO BEACH, FL. 33064 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *Dayton Bernstein* DAYTON BERNSTEIN 2-1-98 984 9942-4044

CP2E034 (10/97)