

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:12

DOCUMENT # K54112 (3)

1. Corporation Name

A CONTEMPORARY PERSONNEL SERVICE, INC.

Principal Place of Business

Mailing Address

ALONSO JR. NICASIO  
10691 NO KENDALL DR #307  
MIAMI FL 33176  
US

ALONSO JR. NICASIO  
10691 NO KENDALL DR #307  
MIAMI FL 33176  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/08/1988

3a. Date of Last Report

01/24/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

Same

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

Same

City & State

28

Zip

Country

29

30

4. FEI Number

65-0096152

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

9. Name and Address of Current Registered Agent

ALONSO JR. NICASIO  
10691 N. KENDALL DR.  
PENTHOUSE 307  
MIAMI FL 33176

10. Name and Address of New Registered Agent

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-registering)

DATE

12. OFFICERS AND DIRECTORS

|                 |                     |
|-----------------|---------------------|
| TITLE           | PT                  |
| NAME            | ALONSO, NICASIO JR. |
| STREET ADDRESS  | 821 W 51ST PL       |
| CITY - ST - ZIP | HIALEAH FL          |
| TITLE           |                     |
| 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           | Same                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            | Same                  |                                                                              |
| 1.3 STREET ADDRESS  | 11830 S.W. 83rd Court |                                                                              |
| 1.4 CITY - ST - ZIP | Miami, FL 33156.      |                                                                              |
| 2.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 2.2 NAME            |                       |                                                                              |
| 2.3 STREET ADDRESS  |                       |                                                                              |
| 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  |                       |                                                                              |
| 4.4 CITY - ST - ZIP |                       |                                                                              |
| 5.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 5.2 NAME            |                       |                                                                              |
| 5.3 STREET ADDRESS  |                       |                                                                              |
| 5.4 CITY - ST - ZIP |                       |                                                                              |
| 6.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME            |                       |                                                                              |
| 6.3 STREET ADDRESS  |                       |                                                                              |
| 6.4 CITY - ST - ZIP |                       |                                                                              |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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, if applicable.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

Nick Alonso Jr  
President

1-27-95

595-3800