

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000057595

1. Entity Name
CAREERSUSA ATLANTA, LLC



FILED

05 APR 14 AM 10:57

SECRET
TALLAHASSEE, FLORIDA

Principal Place of Business
6501 CONGRESS AVENUE, SUITE 200
BOCA RATON, FL 33487

Mailing Address
6501 CONGRESS AVENUE, SUITE 200
BOCA RATON, FL 33487



01032005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0565400

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

OUNJIAN, JENNIFER L
6501 CONGRESS AVENUE, SUITE 200
BOCA RATON, FL 33487

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
CAREERS USA, INC.
6501 CONGRESS AVENUE, SUITE 200
BOCA RATON, FL 33487

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IN THIS SPACE**

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Marilyn J. Ounjian, MM

(561) 995-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #