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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L25364

(5)

PROFESSIONAL TRAVEL TEMPORARIES AND PLACEMENT SE RVICE, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address			t tamtidir did istat Atina tillia Mutte Afar aldir Atuti Atuti Atuti Atuti ibabi				
9700 KOGER BLVD. STE. 102 ST. PETERSBURG FL 33572		P. O. BOX 983 Indian Rocks Beach Us	INDIAN ROCKS BEACH FL 34635			DO NOT WRITE IN T	HIS SP.	ACE		
US						3. Date Incorporated or Qualified				
						10/24/1989				
	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26	4 T L			59-2970594 Not Applic			Not Applicable	
Suite, Apt.	#, etc.	——¬ '''	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional			
22	· · · · · · · · · · · · · · · · · · ·		27					Fee	Required	
City & State	θ	} _γ ΄	City & State			6. Election Campaign Financing		\$5.00 May Be		
23		28	4			Trust Fund Contribution		Adde	d to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the		•		
24	25	[29]	30			Personal Property Tax due June 30.			□ No	
	9. Name and Address of Cu	rrent Registered Agent		81 N	Name	10. Name and Address of New Registe	red Ag	ent		
	PICH, DEBORAH		1'	°' '	varne				•	
1380 GULF BLVD. #208					Street Addre	ess (P.O. Box Number is Not Acceptable)				
CLI	EARWATER FL 33630		 -							
				83						
			7	84 (City			85 Zij	p Code	
					•		-L !	I '	·	
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida State	ites, the ab	ove-u	amed corpo	oration submits this statement for the purpo- on's board of directors. I hereby accept the	se of cl	nanging	its registered	
agent. I a	m familiar with, and accept the o	bligations of Section 607.0505, F	lorida Statu	ıtes. Ites	e corporatio	on's board of directors, I hereby accept the	appoir	itment a	is registered	
SIGNATURE										
0,0,7,7,0,7,2	Signature, typied or printed name of registers		TE Registered	Agent a	ignature requirer	d when reinstating) DA	TE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS				
TATLE	DPS	☐ DELETE		1.1 TITLE			L	Change	Addition	
NAME	PAPICH, DEBORAH ANN		1.2 NAM	ME						
STREET ADDRESS	1380 GULF BLVD. #208		1.3 STR	REET ADO	DRESS				i	
CITY-ST-ZIP	CLEARWATER FL		1.4 CIT	Y-ST-Z	is.					
TITLE	DELETE 2.1		2.1 TITL	2.1 TITLE				Change	Addition	
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET ADD		DRESS					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		ZIP .					
TITLE		☐ DELETE	DELETE 3.1 TITLE					Change	Addition	
NAME			3.2 NAA	ME	1					
STREET ADDRESS			3.3 STR	EET ADI	DRESS					
CITY-ST-ZIP			3.4. CIT	Y-ST-Z	IP					
TITLE		DELETE	4.1 7(1)				L	Change	Addition	
NAME			4. 2 NA	ME				_	l	
STREET ADDRESS			4.3 STR	EET ADO	DRESS					
CITY-ST-ZIP			4.4 CITY	Y-ST-7	IP.					
TITLE		DELETE	5.1 TITL					Change	Addition	
NAME		_	5.2 NAN							
STREET ADDRESS			5.3 STR		JRESS				· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP			5.4 CITY						[
TITLE		☐ DELETE	61 TITE		-			Change	Addition	
NAME		C Perett	6.2 NAM				_	, vivalige	L. AUURAII	
STREET ADDRESS			6.3 STR		- 4					
CITY-ST-ZIP	adifu that the information events	A wall this file also as a set	6.4 CITY	Y - \$1 - ZI	P	Cartina 410 07/0V/N Florida Cost 2				

i. I nereby 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 informatio indicated on this annual report or supplimental 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 frustee 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.

CICHATURE.

4-29-98