

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

**FILED**  
**May 13 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # L61483 (8)**  
 1. Corporation Name  
**AMA STAFFING, INC.**



Principal Place of Business <b>6414 14TH STREET W BRADENTON FL 34207 US</b>	Mailing Address <b>6414 14TH STREET WEST 29605 U.S. HIGHWAY 19 NORTH, SUITE 210 BRADENTON FL 34207 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	29
25	30

3. Date Incorporated or Qualified <b>04/02/1990</b>	
4. FEI Number <b>59-3004926</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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

**MONAKEY, MICHAEL J**  
**6414 14TH ST W**  
**BRADENTON FL 34207**

10. Name and Address of New Registered Agent

81 Name **DANIEL J SULLIVAN**

82 Street Address (P.O. Box Number is Not Acceptable)  
**6414 14TH ST W**

83

84 City **BRADENTON** FL 85 Zip Code **34207**

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: *Daniel J Sullivan* CFO DATE: **4/28/98**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BONGART, EDWARD</b>	
STREET ADDRESS	<b>6414 14TH STREET W</b>	
CITY-ST-ZIP	<b>BRADENTON FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>RATNER, RICHARD G</b>	
STREET ADDRESS	<b>6414 14TH STREET W</b>	
CITY-ST-ZIP	<b>BRADENTON FL</b>	
TITLE	<b>CEO</b>	<input type="checkbox"/> DELETE
NAME	<b>CLANCY, ROBERT</b>	
STREET ADDRESS	<b>6414 14TH STREET</b>	
CITY-ST-ZIP	<b>BRADENTON FL</b>	
TITLE	<b>CFO</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>MONAKEY, MICHAEL</b>	
STREET ADDRESS	<b>6414 14TH STREET</b>	
CITY-ST-ZIP	<b>BRADENTON FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>V</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>JOEL DUNCAN</b>	
1.3 STREET ADDRESS	<b>6414 14TH ST W</b>	
1.4 CITY-ST-ZIP	<b>BRADENTON, FL 34207</b>	
2.1 TITLE	<b>V</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>LINDA BAILEY</b>	
2.3 STREET ADDRESS	<b>6414 14TH ST W</b>	
2.4 CITY-ST-ZIP	<b>BRADENTON, FL 34207</b>	
3.1 TITLE	<b>CFO</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>DANIEL J SULLIVAN</b>	
3.3 STREET ADDRESS	<b>6414 14TH ST W</b>	
3.4 CITY-ST-ZIP	<b>BRADENTON, FL 34207</b>	
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 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: *Daniel J Sullivan* CFO DATE: **4/28/98** (941) 765-4634

CR2E034 (10/97)