

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 MAY 14 PM 2:50

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

DOCUMENT # L96000000473

PRS PROFESSIONAL RECRUITING SERVICES, L.C.  
320 SOUTH FLAMINGO ROAD  
BOX 118  
PEMBROKE PINES FL 33027

1a. Principal Place of Business Address

111 NE 1ST STREET  
SUITE 703  
MIAMI FL 33132

2. Principal Place of Business

CIRCLE

2a. Mailing Address

(SAME)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIRAMAR, FL

City & State

Zip

33025

Country

BROWARD

Zip

Country

3. Date Organized or Qualified

04/23/1996

3a. State of Formation

FL

4. FEI Number

65-0661326

☐ Applied For

☐ Not Applicable

5. Date of Last Report

05/07/1997

6. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

FELDENKRAIS, MICHAEL P.A.  
12000 BISCAYNE BOULEVARD  
SUITE 220  
MIAMI FL 33181

Name

SYLVIE HERNANDEZ

Street Address (P.O. Box Number is Not Acceptable)

2300 EAST LAKE MIRAMAR CIRCLE

Suite, Apt. #, etc.

City

MIRAMAR

State

FL

Zip Code

33025

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent and accept the obligations.

SIGNATURE

*[Signature]*

DATE 5/9/98

(Registered Agent Accepting Appointment) (NOT: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MEM

SYLVIE  
HERNANDEZ, SYLVIE

2300 EAST LAKE MIRAMAR  
111 NE 1ST STREET, SUITE 7

MIRAMAR, FL 33025  
MIAMI FL

MM

FELDENKRAIS, MICHAEL

12000 BISCAYNE BLVD. #220

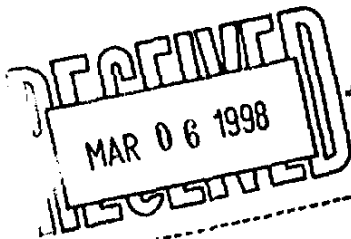
MIAMI FL

MM

KITCHEN, DON

5458 MANTILLO CREEK ROAD

MECHANICSVILLE VA



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\*\*\*\*188.75 \*\*\*\*188.75

11. I do 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 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

*[Signature]*

3/9/98 954-430-0204

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #