

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000006334

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: WORKFORCE SOLUTIONS II, LLC

## Current Principal Place of Business:

2501 SOUTH OCEAN DRIVE, SUITE 915  
HOLLYWOOD, FL 33019

## New Principal Place of Business:

2501 SOUTH OCEAN DRIVE, SUITE 915  
HOLLYWOOD, FL 33019 US

## Current Mailing Address:

2501 SOUTH OCEAN DRIVE, SUITE 915  
HOLLYWOOD, FL 33019

## New Mailing Address:

2501 SOUTH OCEAN DRIVE, SUITE 915  
HOLLYWOOD, FL 33019 US

FEI Number: 65-0951559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS ENTERPRISES INC  
941 4TH STREET #200  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

WALLACE, CHARLES E  
9300 W BAY HARBOR DRIVE  
BAY HARBOR ISLANDS, FL 33154 US

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.

SIGNATURE: CHARLES E. WALLACE

05/01/2002

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MEM ( ) Delete  
Name: WORKFORCE SOLUTIONS, I, LLC  
Address: 2501 SOUTH OCEAN DRIVE, STE 915  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR (X) Delete  
Name: WALLACE, CHARLES E  
Address: 2501 SOUTH OCEAN DRIVE, STE 915  
City-St-Zip: HOLLYWOOD, FL 33019

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WALLACE, CHARLES E  
Address: 2501 SOUTH OCEAN DRIVE, STE 915  
City-St-Zip: HOLLYWOOD, FL 33019

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: CHARLES E. WALLACE

MGR

05/01/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date