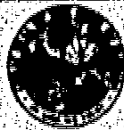


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 26 PH 2: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M89861

(2)

1. Corporation Name

CREATIVE EMPLOYMENT SERVICES, INC.

Principal Place of Business

1800 SARNO RD.
SUITE 207
MELBOURNE FL 32905

Mailing Address

1800 SARNO RD.
SUITE 207
MELBOURNE FL 32905

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/14/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2898551

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

YANDURA, BERNARD F.
7817 MAPLEWOOD DR
APT #610
MELBOURNE FL 32904

10. Name and Address of New Registered Agent

81

Name YANDURA, BERNARD F.

82

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

5631 HERONS LANDING DRIVE

83

84

City ROCKLEDGE

FL

Zip Code 32955

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
YANDURA BERNARD F
5631 HERONS LANDING DR
ROCKLEDGE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
YANDURA, SUE R.
7817 MAPLEWOOD DR #610
W MELBOURNE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

ZIP 32955

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

5631 HERONS LANDING DR
ROCKLEDGE, FL 32955

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Susan R. Mordam

SUSAN R. YANDURA

Date

4/17/95

707-253-0333

SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR