**FILED** Jun 20, 2002 8:00 am Secretary of State 06-20-2002 90057 046 \*\*\*150.00 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # Q 000000 8763

1. Entity Name

A. S. A. P. Personnel Services Inc.

DO NOT WRITE IN THIS SPACE				
2. Principal Place of Rusiness 1906 N. Armania	3. Mailing Address PO Box 172.5	522	870154	· ·
Suite, Apt. #, etc.	Suite, Apt. #, etc.	,	DO NOT WRITE IN THIS S	PACE
TAMPA FL	City & State A		FEI Number 69-3 62 5151	Applied For Not Applicable
33607 Country U.S.A	33672 CC		F Certificate of Status Desired	8.75 Additional Fee Required
		Name 7. M	Name and Address of Current Registered	Agent
DO NOT WRITE IN THIS SPACE		Street Address (PO BoyNumber is\Nu\Acceptable) 307		
		CityTAMPA	4 FL	Zip Code 33672
8. The above named entity submits this statement for SIGNATURE  Signature, typed or printed name of registered agent and  9. This corporation is eligible to satisfy its Intangible.	the purpose of changing its regist d title if applicable. (NOTE Page 1	M MUM ered Agent signature required when	gent, or both, in the State of Florida.  Peinstating)  DATE	
Tax filing requirement and elects to do so. (See criteria on back)	After May 1, Fe Amended UBF Make Check Payable to	e is \$550.00 R is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11. OFFICERS AND D	<del></del>			
NAME STREET ADDRESS 1906 Practicant Grant Francisca F	Fra #307 SS	ITLE AME TREET ADDRESS ITY-ST-ZIP		34B (12/01)
TITLE TAMPA F L 33 NAME STREET ADDRESS	N/	ITLE AME Treet address		CR2E034B
CITY-ST-ZIP TITLE	···	ITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
NAME STREET ADDRESS CITY-ST-ZIP	: NA ST	AME IREET ADDRESS ITY-ST-ZIP	DO_NOT_WRIT	
TITLE VAME STREET ADDRESS CITY-ST-ZIP	TII NA ST	TLE	IN THIS SPAC	
TITLE NAME STREET ADDRESS DITY-ST-ZIP	NA Sti	TLE AME REET ADDRESS TY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, NA STF	ILE  ME  REET ADDRESS  IY-ST-ZIP		

13. 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 report or supplemental 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 11 or on an attachment with an address swith all other like empowered.

SIGNATURE:

Attachment

Florida Dept of State
Division of Corporations
Corporate Records
P. O. Box 6327
Tallahassee, FL 32314

Juan Mejia A.S.A.P. Personnel Services, Inc. 1906 N. Armenia Avenue, Suite 307 Tampa, FL 33607

870154

June 12, 2002

Attention: J. Shivers

Dear Sir or Madam:

Please find enclosed the corporation fee and UBR corporation application. Per our conversation of May 31, 2002, I did not have the form to submit until now, nor did I have Internet access to obtain same. Per your instruction, I am enclosing \$150 payable to Dept. of State along with the completed form. Thank you for your assistance.

Sincerely,

Juan Mejia

Principal, A.S.A.P. Personnel Services, Inc.