

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90272 005 ***150.00

DOCUMENT # P00000088825

1. Entity Name
TEMP-UP STAFFING, INC.



Principal Place of Business
11151 66TH ST N
SUITE 404
LARGO, FL 33773

Mailing Address
P O BOX 22721
ST PETERSBURG, FL 33742

14010446



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

02092005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3672535

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ROWE, JAMES C ESQ.
100 2ND AVENUE SOUTH
SUITE 1201S
ST. PETERSBURG, FL 33701

7. Name and Address of New Registered Agent
Name Debbie Meza
Street Address (P.O. Box Number is Not Acceptable)
11151 66th Street North # 403
City Largo FL Zip Code 33773

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Debbie Meza DATE 4-26-05

(NOTE: Registered Agent signature required when reinstating)

FILE NOW! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	CASTILLO, DEBBIE	
STREET ADDRESS	2473 KINGFISHER LANE I-101	
CITY-ST-ZIP	CLEARWATER, FL 33762	
TITLE	STD	<input type="checkbox"/> Delete
NAME	WRIGHT, GAIL	
STREET ADDRESS	9925 61ST WAY N	
CITY-ST-ZIP	PINELLAS PARK, FL 33782	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOUGLAS, THERESA	
STREET ADDRESS	6531 30TH STREET N	
CITY-ST-ZIP	ST PETERSBURG, FL 33702	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Debbie Meza	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2473 Kingfisher Lane I-101	
STREET ADDRESS	Clearwater, FL 33762	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Debbie Meza DATE 2-11-05 DAYTIME PHONE # 727-546-8972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR