FILED FOR PROFIT CORPORATION Jul 09, 2002 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) DOCUMENT #0 07-09-2002 90374 010 ***158.75 1. Entity Name R0127658 3. Mailing Address 2. Principal Place of Business W. 5950 Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite Apt. #, etc. 4. FEI Number Applied For 65-104905° Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE ss (P.O. Box Number is Not IN THIS SPACE Daklono 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) title if applicable January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees П (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE HolNESS TITLE PK Blud NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIF TITLE IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 eport 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 of 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, with all other like empowered.

SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)

Daytime Phone #

attachment

B0127658



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

June 13, 2002

COMPLETE STAFFING, INC. 5950 WEST OAKLAND PARK BLVD, STE. 112 LAUDERHILL, FL 33313

SUBJECT: COMPLETE STAFFING, INC. Ref. Number: P00000097661

Pursuant to our telephone conversation of June 13, 2002, I am enclosing a blank 2002 report form.

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

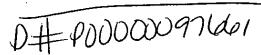
If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott Document Specialist

Letter Number: 502A00038923

Attachment BUIDIOS8

COMPLETE STAFFING Inc 5950 West Oakland Park Blvd Suite 112 Lauderhill Florida 33313



June 24, 2002

Florida Department Of State Katherine Harris Secretary Of State

Ref # P0000097661 Letter #502A00038923

Mr. Tyrone Scott

Re: our telephone conversation on June 13th, 2002, I had requested several times to have UBR sent to me, but I think the information was sent to my old office location, and per the post office they are not allowed to forward my mail as there was more than one business sharing that office space, this my be the reason why I did not receive the information that was sent, Sorry for not sending out my information for renewal on time.

Enclosed is a check/ money order in the amount of \$150.00 to have my license renewed and \$8.75 for certificate of status,

Thanks in advance for your swift response

Sincerely.

-Kavine E. Holness