


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P18079 (4)

1. Corporation Name
DYNAMIC TEMPORARY SERVICES, INC.

Principal Place of Business 3535 PIEDMONT RD. N.E. ATLANTA GA 30305	Mailing Address 3535 PIEDMONT RD. N.E. ATLANTA GA 30305
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/19/1988	3a. Date of Last Report 04/12/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 58-1765333	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLNER, GUY W.	1.2 NAME	
STREET ADDRESS	3303 CHATHAM RD. N.W.	1.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA GA	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYAN, LARRY T.	2.2 NAME	
STREET ADDRESS	1580 LAZY RIVER LN.	2.3 STREET ADDRESS	
CITY - ST - ZIP	DUNWOODY GA	2.4 CITY - ST - ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLE JR., MADISON F.	3.2 NAME	
STREET ADDRESS	435 PEACHTREE BATTLE AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA GA	3.4 CITY - ST - ZIP	
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COLDREN, KATHY	4.2 NAME	PAM TAYLOR
STREET ADDRESS	3535 PIEDMONT RD., N.E.	4.3 STREET ADDRESS	3535 PIEDMONT RD
CITY - ST - ZIP	ATLANTA GA	4.4 CITY - ST - ZIP	ATLANTA, GA 30305
TITLE	SVP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAIN, MARK	5.2 NAME	
STREET ADDRESS	3535 PIEDMONT RD., N.E.	5.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA GA	5.4 CITY - ST - ZIP	
TITLE	CEO	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, DOUGLAS	6.2 NAME	
STREET ADDRESS	3535 PIEDMONT RD., N.E.	6.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA GA	6.4 CITY - ST - ZIP	

14. I do 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 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: Pam Taylor REQUIRE PAM TAYLOR 4-30-97 (404) 240-3000

CR2E034 (9/96)