

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/19/1988	
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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		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	Director
NAME	MILLNER, GUY W.	1.2 NAME	C. Douglas Miller
STREET ADDRESS	3303 CHATHAM RD. N.W.	1.3 STREET ADDRESS	3535 Piedmont Rd NE, Atlanta, GA 30305
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
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	
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	AT	4.1 TITLE	
NAME	TAYLOR, PAM	4.2 NAME	
STREET ADDRESS	3535 PIEDMONT RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	
TITLE	SVP	5.1 TITLE	VP Secretary
NAME	HAIN, MARK	5.2 NAME	MARK HAIN
STREET ADDRESS	3535 PIEDMONT RD., N.E.	5.3 STREET ADDRESS	3535 Piedmont Rd NE,
CITY-ST-ZIP	ATLANTA GA	5.4 CITY-ST-ZIP	Atlanta, GA 30305
TITLE	CEO	6.1 TITLE	
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 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: _____

CP2E034 (10/97)