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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P92000013341

CVRT EMPLOYEE LEASING COMPANY, INC.

Principal Place	of Business	Mailing Address				18 (1911 1311) 6811) 9	IBILL BRIDL 166	<b>39</b> 111 <b>23</b> 14111 <b>6</b> 1	HOU! HO!
4900 MANATEE AVENUE WEST		4900 MANATEE AVENUE WEST						•	
SUITE 101		SUITE 101			O NOT WRITE	IN THIS SI	PACE		
BRADENTON FL	. 34209	Bradenton FL 34209			3. Date Incorporated		IN THIS SI	702	<del></del>
	•				12/18/1992	O, Quamos			}
2 Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number		-/ - 1	App	lied For-
	W. Busch Blvd.	26 2801 W. Bus	sch I	Blvd.	- 65-0374035			<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		, <del></del>	5. Certifcate of Statu	s Desirod		\$8.75 A	dditional
ste	240	27 Suite 240			5. Certificate of State	S Desired L	<u> </u>	Fee Rec	uired
City & State		City & State			6. Election Campaig	n Financing	7	\$5.00 N	,
23 Tampa	a, FL 33618-4520	28 Tamp, FL			Trust Fund Contri	bution		Added to	Fees
Zip	Country	<b>├</b> ─ '	Country		8. This corporation of				JNo
24	25 USA	29 3 3 6 1 8 - 4 5 2 0   30	USA		Personal Property 10. Name and Addre				NO
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Addre	ISS OF NEW REG	istarad ve	JOIN	
BIDD	ELL, JEFFERSON F	•		Ü	Jerold A. Lit				
3400 S. TAMIAMI TRAIL			82 Street Addre		ddress (P.O. Box Number is 1 W. Busch B	Not Acceptable	e)		
SARASOTA FL 34239			83						
				Suit	te 240				
			84	City	Tampa		FL	85 Zip C 336	
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, ti	the above	-named c	ornoration submite this state	ment for the pu	mose of ch	anging its r	egistered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	Florida, Such change was autho	orized by t	the corpor	ration's board of directors. I	hereby accept th	he appointr	ment as reg	istered
	1 (1004 1 (14)	ina pri viection 007.0303, 1 tonda	Statutes.				3/4/	199	Į
SIGNATURE	Agrigative, speed or printegrange of registered agent	<del>&amp;&amp;</del>			quired when reinstating)		DATE 4	79	
	I XIONIA (MI	and title if applicable. (NOTE: Region DIRECTORS	istered Agent	signature rec	quired when reinstating) ADDITIONS/CHAN	GES TO OFFIC	DATE F	DIRECTOR	
SIGNATURE	Ampeire, you or printed harps of registered agent OFFICERS AND	and title if applicable. (NOTE: Region DIRECTORS	istered Agent 13. 1.1 TITLE	signature red	aured when reinstating)  ADDITIONS/CHAN Pres/Secty/D:	GES TO OFFIC	DATE F	DIRECTOR	
SIGNATURE	OFFICERS AND	and title if applicable. (NOTE: Region DIRECTORS	13. 1.1 TITLE 1.2 NAME	signature red	quired when reinstating) ADDITIONS/CHAN	GES TO OFFIC	DATE F	DIRECTOR	
SIGNATURE  12.  TITLE	SMITH, TIM 4407 22ND AVE. W.	and title if applicable. (NOTE: Region DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADORESS	aured when reinstating)  ADDITIONS/CHAN Pres/Secty/D:	GES TO OFFICE LITECT AND ADDRESS TO OFFICE AND ADDRESS TO OFFICE A	BATE F	DIRECTOR Change	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND	and title if applicable. (NOTE: Region DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST	ADORESS	ADDITIONS/CHAN Pres/Secty/D: Jerold A. Li	GES TO OFFICE AND ADDRESS TO A STREET AND A STREET A STREET AND A STREET A STREET AND A STREET A STREET AND A	Ste	DIRECTOR Change	RS IN 12
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Smith, TIM 4407 22ND AVE. W. BRADENTON FL 34209	and title If applicable. (NOTE: Region DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-ST 2.4 CITY-ST	ADDRESS	ADDITIONS/CHAN Pres/Secty/D: Jerold A. Li 2801 W. Busc	GES TO OFFICE AND ADDRESS TO A STREET AND A STREET A STREET AND A STREET A STREET AND A STREET A STREET AND A	BATE FOR SAND TREAS	DIRECTOR Change	RS IN 12
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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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

 $\mathcal{M}_{\mathcal{A}}$ 

STREET ADDRESS

NAME