(813) 229-1731

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

in Block 12 or Block 13 if changed, or on an attachment with an address

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 OCT -7 PM 2: 34 DOCUMENT # P93000046249 (7) SECRETARY OF STATE TALLAHASSEE, FLORIDA FIDELITY STAFFING SERVICES INC. Principal Place of Business Mailing Address 0200 S. DADELAND BLVD. -9200 S. DADELAND BLVD MIAMI-FL 33156 DO NOT WRITE IN THIS SPACE MIAMI FL 33156 UG. H6~ 3. Date Incorporated or Qualified 06/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2611 4th Avenue E. 2611 4th Avenue E. <u>59-3187780</u> Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Tampa, Florida Tampa, Florida Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes No Zip Country USA 33605 USA 24 33605 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name -CHELDON: GEORGE Kevin H. Graham, Esquire -108 SOUTH MONROE 82 Street Address (P.O. Box Number is Not Acceptable) Shumaker, Loop & Kendrick, LLP STE 200-TALLAHASSEE FL 32301 **A3** 101 E. Kennedy Boulevard, Suite 2800 85 Zip Code 33602 84 City Tampa 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. 4198 Signature typed or printed name of registered agent and title if epplicable (NOTE Registered Agent signature required when reinstating) DATE 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE __ DELETE Change Addition CR2E034 TAMMARO, PAT 1.2 NAME NAME 9200 S. DADELAND BLVD., #725 STREET ADDRESS 1.3 STREET ADDRESS 2611 4th Avenue E. MIAMI-FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Tampa, FL 33605 2 (TITLE TITLE DELETE Change Addition j**oe**kel, ken NAME 2.2 NAME 9200 S. DADELAND BLVD., #725 STREET ADDRESS 2.3 STREET ADDRESS 2611 4th Avenue E. MIAMI-FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Tampa, FL 33605 TITLE 3.1 TITLE L Change Addition DELETE NAME 3.2 NAME 00266**2800**--019 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 東京米米750.00 ★米米4 TITLE 4.1 TITLE DELETE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF TITLE 5.1 TITLE DELETE __ Change __ Addition NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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