

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000008802 (8)**

1. Corporation Name

NATIONAL EMPLOYMENT SERVICES OF MIAMI, INC.



Principal Place of Business

**2439 N.W. 7TH ST.
MIAMI FL 33125**

Mailing Address

**2439 N.W. 7TH ST.
MIAMI FL 33125**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
02/03/1994

3a. Date of Last Report
01/25/1995

4. FEI Number
65-0451428

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**RADBILL, MARITZA M
2439 N.W. 7TH ST.
MIAMI FL 33125**

10. Name and Address of New Registered Agent

81 Name
JUAN A FERNANDEZ

82 Street Address (P.O. Box Number is Not Acceptable)
2439 NW 7TH ST.

83

84 City
MIAMI

85 Zip Code
FL 33125

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

Juan Fernandez

(Print Name of Registered Agent) (Signature of Registered Agent)

05/27/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PD
SANABIA, FERNANDO
2439 N.W. 7TH ST., SUITE 1
MIAMI FL 33125**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**STD
TORRENS, OLGA N
2439 N.W. 7TH ST., SUITE 1
MIAMI FL 33125**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
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STREET ADDRESS
CITY-STATE-ZIP

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13.

1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
**PD
JUAN A FERNANDEZ
2439 NW 7TH ST #1
MIAMI FL 33125**

☒ Change ☐ Addition

2.1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
**STD
ELIZABETH PARRA
2439 NW 7TH ST #1
MIAMI FL 33125**

☒ Change ☐ Addition

3.1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Juan Fernandez

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

05/27/96

Date of Filing

CR2E034 (12/95)