

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

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 8:09

DOCUMENT # P94000009371 (3)

1. Corporation Name

MIAMI SUPER STAFFING, INC.

Principal Place of Business

1911 W 60 ST
SUITE 128
HIALEAH FL 33012

Mailing Address

1911 W 60 ST
SUITE 128
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1994

3a. Date of Last Report

4. FEI Number

X 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. 199.042, Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

21 1800 W 68TH ST

Suite, Apt. #, etc

22 Suite #113-110

City & State

23 Hialeah, FL

Zip

24 33014

Country

2a. Mailing Address

26 1800 W 68th ST

Suite, Apt. #, etc

27 Suite 113-110

City & State

28 Hialeah, FL

Zip

29 33014

Country

30

9. Name and Address of Current Registered Agent

NUEZ, FERNANDO G
1911 W 60 ST
SUITE 128
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name

Gasal, Wilma

82 Street Address (P.O. Box Number is Not Acceptable)

1402 Las Olas

83

Apt 1025

84 City

Ft Lauderdale

FL

85 Zip Code

33301

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

GASAL, WILMA

(Signature typed or printed name of registered agent next to 7 space above)

(Print Registered Agent signature required when registering)

6/10/95

(DATE)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

D
NUEZ, FERNANDO G
1911 W 60 ST SUITE 128
HIALEAH FL 33012

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

D
GASAL, WILMA
1402 Las Olas Apt 1025
Ft Lauderdale, FL 33301

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, 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 within an address.

SIGNATURE:

GASAL, WILMA

(Signature typed or printed name of signing officer or director)

04/13/95

(Date)

(Signature/Printer's Mark)