

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 4:04

DOCUMENT # P94000042812 (5)

1. Corporation Name

PINNACLE STAFFING, INC.

Principal Place of Business

Mailing Address

1095 SHOTGUN ROAD
SUNRISE FL 33326

1095 SHOTGUN ROAD
SUNRISE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/08/1994
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

Applied For

54-1714160

Not Applicable

Date, Apt. #, etc.

Date, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NUGENT, BRIAN M
106 E. COLLEGE AVE.
SUITE 1200
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

(341)

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

HERMANS, RICHARD F

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

D

NAME

WILLOCKS, JAMES S

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

D

NAME

ESCARZAGA, WALTER

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

D

NAME

SOSCIA, LOUIS E

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

D

NAME

MCANNAR, DANIEL B

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

D

NAME

MCMAMARA, MICHAEL J

STREET ADDRESS

C/O 1095 SHOTGUN ROAD

CITY - ST - ZIP

SUNRISE FL 33326

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 131.07(3)(g), Florida Statutes. I further certify that this information is based on the annual report or supplemental annual report as 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; that the receiver or trustee empowered to execute this report as required by Chapter 107, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in my attachment with an address.

SIGNATURE:

Richard F Hermans

RICHARD F HERMANUS

1/6/95

305424

3833