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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000068342 (2)**1. Corporation Name

HOWARD EMPLOYEE SERVICES, INC.

									4 3 	13/86 HILL 8/8/	
Principal Place of Business 2704 BEE RIDGE ROAD 2ND FLOOR SARASOTA FL 34239				iling Address				114211421114111111111111111111111111111		78748 7	
			2ND	2704 BEE RIDGE ROAD 2ND FLOOR SARASOTA FL 34239-6417							
ALTONOMINE AT UTONOMINE TE ATEMATIC								3. Date Incorporated or Qualified 09/15/1994		ate of Last I 29/1996	Report
2. Principal Pl	lace of Busine	88	28.	Mailing Address				4. FEI Number		A	pplied For
1			26	26 Suite, Apt. #, etc.			65-0520232			ot Applicable	
Suite, Apt. #, etc.			 				5. Certificate of Status Desired			\$8,75 Additional Fee Required	
City & State	е			City & State				6. Election Campaign Financing	,		May Be
23			28					Trust Fund Contribution			to Fees
Zφ		Country		Zφ	Cou	ntry		8. This corporation has liability for			s. 199.032,
24		5	29	4 4 1	30				Yes		
LION .		nd Address of Cur	rrent Hegisu	эгед Адепт		81	Name	10. Name and Address of New R	egistereu	Agent	
	vard, ellen I bee Ridge							······································			
		KUAU		82 Stree		Street Add	ddress (P.O. Box Number is Not Acceptable)				
2ND FLOOR Sarasota FL 34239						83					
Ora e	NOO IN I E S	TEOU			ļ					1	
					ļ	64	City		FL	85 Zip	Code
11. Pursuant	to the provisio	ns of Sections 607.	0502 and 60	7.1508, Florida Sta	tutes, the al)OV6-I	named corp	poration submits this statement for the	purpose o	changing	its registered
office or r agent. La	registered age im familiar with	nt, or both, in the St - and accept the ob	tate of Florida olioations of	 a. Such change wa Section 607,0505. 	is authorizet Etorida Stat	d by t	he corpora	tion's board of directors. I hereby acce	opt the app	cointment a:	registered
						UIGS.					
-			_	,	i ionaa olai	U105.					
SIGNATURE		priced came of registered		Lapplicable. (N	NOTE: Registered			ired when reinstaling)	DATE		
SIGNATURE	Signature, typed or		d agent and tille if AND DIRECT	Lapplicable. (N	NOTE: Registered	i Ageni			DATE		
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