

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000092288

FILED  
Aug 03, 2004  
Secretary of State

Entity Name: ARCHIPRO STAFF AGENCY, INC.

## Current Principal Place of Business:

80 SW 8TH ST  
STE 2000  
MIAMI, FL 33130

## New Principal Place of Business:

## Current Mailing Address:

80 SW 8TH ST  
STE 2000  
MIAMI, FL 33130

## New Mailing Address:

FEI Number: 65-0545270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SWISHER, LESLIE L  
80 SW 8TH ST  
STE 2000  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SDVT ( ) Delete  
Name: SWISHER, LESLIE L  
Address: 9660 WEST BAY HARBOR DRIVE  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D ( ) Delete  
Name: SWISHER, LESLIE L  
Address: 9660 WEST BAY HARBOR DRIVE  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SDVT (X) Change ( ) Addition  
Name: SWISHER, LESLIE L  
Address: 70 NW 105TH STREET  
City-St-Zip: MIAMI SHORES, FL 33150

Title: D (X) Change ( ) Addition  
Name: SWISHER, LESLIE L  
Address: 70 NW 105TH STREET  
City-St-Zip: MIAMI SHORES, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE L. SWISHER

O/D

08/03/2004

Electronic Signature of Signing Officer or Director

Date