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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000017997 (4)**

1. Corporation Name

TREASURE COAST PERSONNEL, INC.

Principal Place of Business	Mailing Address
1555 PALM BEACH LAKES BOULEVARD SUITE 1510 WEST PALM BEACH FL 33401	1555 PALM BEACH LAKES BOULEVARD SUITE 1510 WEST PALM BEACH FL 33401

2. Principal Place of Business	2a. Mailing Address
21 1818 S. AUSTRALIAN Ave	26 1818 S. AUSTRALIAN Ave
Suite, Apt. #, etc 22 Suite 251	Suite, Apt. #, etc 27 Suite 251
City & State 23 West Palm Beach, FL	City & State 28 West Palm Beach, FL
Zip / Country 24 33409 / 25 Palm Beach	Zip / Country 29 33409 / 30 Palm Beach

3. Date Incorporated or Qualified: 03/03/1995
3a. Date of Last Report:

4. FEI Number: 65-0568666 ☐ 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

NATHAN, PETER A
1555 PALM BEACH LAKES BOULEVARD
SUITE 1510
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: Edward S. ANTARSH
82 Street Address (P.O. Box Number is Not Acceptable): 1818 South AUSTRALIAN Ave., Suite 251
83
84 City: West Palm Beach FL 85 Zip Code: 33409

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: Edward S. Antarsh — DATE: 2/8/96
Signature, typed or printed name of Registered Agent, and title if applicable — (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANTARSH, NINA S 2352A SPRINGSIDE LANE COURT INDIANAPOLIS IN 46260	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	President ANTARSH, NINA S. 3603 FAIRWAY DRIVE NO JUPITER, FL 33477	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANTARSH, EDWARD S 2352A SPRINGSIDE LANE COURT INDIANAPOLIS IN 46260	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	Vice President ANTARSH, Edward S. 3603 FAIRWAY DRIVE NO. JUPITER, FL 33477	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	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)(i), 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 added in an attachment with an address.

SIGNATURE: Nina S. Antarsh — 2/8/96 — 407-689-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)