FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000041608 (7)

ALLIED EMPLOYMENT SERVICES, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 119 W. 23 STREET 119 W. 23 STREET						(IBANDEN ING IRANI ANNI SAKIN BANN BANN DANII RIT	NY CHANGE BILLS	88101 (BII 1881	
PANAMA CITY FL 32405 PANAMA CITY FL 32405			405			DO 1107 1107 1107 1107 1107 1107 1107 110			
						DO NOT WRITE IN THIS S 3. Date incorporated or Qualified	SPACE		_
						05/26/1995			
⊢ .	Place of Business	2a. Mailing Address	} - 1			4. FEI Number	1	Applied For	
21 Suita Ant	# ole	26				59-3317531 Not Appli			,
Suite, Apt. #, etc 22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	te	City & State	 			6. Election Campaign Financing \$5.00 May Be			
23	28			Trust Fund Contribution Added to Fe			l to Fees	╛	
Zip	Country	Zip	$\overline{}$	untry		8. This corporation owes or has paid the curr			1
24	9. Name and Address of Cur	29	30	T		<u> </u>		□ No	1
				81	Name	10. Name and Address of New Registered	egent		4
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD				"	Name				
	13 ALMERIA AVENUE				Street Addre	dress (P.O. Box Number is Not Acceptable)			
l a	ORAL GABLES FL 33134			83					4
				63					
				1 1	City	FL	1 1 '	Code	1
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the St	0502 and 607.1508, Florida State of Florida Such change wa	tutes, the a	bove-i	named corpo	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	changing	its registered	1
agent. La	im familiar with, and accept the ob	ligations of, Section 607.0505,	Florida Sta	tutes.	по обърска	one board of directors. Thereby decept the appe	minimonic da	s registered	
SIGNATURE	Signature, typed or printed name of registered								
12.		AND DIRECTORS	13.		signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DC INI 10	-16
TITLE	PSTD	DELETE	1.1 7				Change		⊣ૅૅ
NAME	TEETER, LOIS S		1.2 N						1
STREET ADDRESS	119 W. 23 STREET			TREET AL	DOBESS				18
CITY-ST-ZIP	PANAMA CITY FL 32405			ITY-ST-					Įς
TITLE		DELETE	2.1 Ti				Change	Addition	윊
NAME			22 N	AME			•	<u> </u>	
STREET ADDRESS			2.3 \$	TREET AL	OORESS				
CITY-ST-ZIP			2.40	OTY-ST-	ZIP				
TITLE		DELETE	3.1 TI				Change	Addition	1
NAME			3.2 N	AME	1		-		
STREET ADDRESS			3.3 S	TREET AC	DRESS				
CITY-ST-ZIP			3.4. 0	CITY-ST-	ZIP				
TITLE		DELETE	4.1 TI				Change	☐ Addition	1
NAME			4.2 N	NAME					
STREET ADDRESS			4.3 \$1	TREET AD	DDRESS				1
CITY-ST-ZIP			4.4 CI	ITY-ST-	ZIP				1
TITLE		☐ DELETE	5.1 TI	TLE			Change	☐ Addition	1.
NAME			5.2 N/	AME	!				
STREET ADDRESS			5.3 \$1	TREET AD	DRESS				
CITY-ST-ZIP			5.4 C	ITY-ST-Z	ZIP				
TITLE		☐ DELETE	6.1 II				Change	Addition	1
NAME			6.2 NA	AME			-		
STREET ADDRESS			6.3 ST	TREET AD	ORESS				ĺ
CITY-ST-ZIP			6.4 CI	ITY-ST-2	ZIP				
44									

I hereby certify that the information supplied with this filing 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 error attachment with an address.

98 (850) 2692/28