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Apr 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000050443 (7)

1. Corporation Name  
MANAPRO SERVICES FLORIDA, INC.



Principal Place of Business Mailing Address  
C/O KTG&S REGISTERED AGENT CORPORATION C/O KTG&S REGISTERED AGENT CORPORATION  
100 S.E. 2ND STREET, 28TH FLOOR 100 S.E. 2ND STREET, 28TH FLOOR  
MIAMI FL 33131 MIAMI FL 33131-2100

3. Date Incorporated or Qualified 06/27/1995 3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address  
21 7206 South Devon Drive #B 26 Manapro Services Florida, Inc.  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 TAMARAC Florida 27 7206 South Devon Dr. #B  
City & State City & State  
23 28 Tamarac Florida  
City & State City & State  
24 33321 25 USA 29 33321 30 USA  
Zip Country Zip Country

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  
KTG&S REGISTERED AGENT CORPORATION 81 Name Mr. Jeff Budnick  
100 S.E. 2ND STREET 82 Street Address (P.O. Box Number is Not Acceptable)  
28TH FLOOR 750-3 Coco Plum Circle  
MIAMI FL 33131 83  
84 City Plantation FL 85 Zip Code 33324

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 of person authorized to change registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 4-9-97

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
TITLE DPST 1.1 TITLE President  
NAME SCHER, LILLIAN 1.2 NAME Brooke Phillips  
STREET ADDRESS 7206 S DEVAN DR 1.3 STREET ADDRESS 1000 Quayside Towers #510  
CITY-ST-ZIP TAMARAC FL 1.4 CITY-ST-ZIP Miami, FL, 33138  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE: Brooke Phillips 3-31-97 (310) 792-1067  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)