## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P95000080575

1. Entity Name

MANAGEMENT RECRUITERS OF ST. PETERSBURG, INC.



## FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90131 035 \*\*\*150.00

Zip Country Zip Country 5. Certificate of Status Desired S.7.5 Addition Foo Requised  -6. Name and Address of Current Registered Agent - 7.7 Name and Address of New Registered Agent - 7.8 Name and Address (P.O. Box Number is Not Acceptable)  Signature Address of New Registered Agent - 7.8 Name and Address of New Registered Agent - 7.8 Name and Address of New Registered Agent - 7.8 Name and Address of New Registered Agent - 7.8 Name and Address (P.O. Box Number is Not Acceptable)  Signature Address of New Registered Agent - 7.8 Name and Address of New Registered Agent - 7.8 Name and	Principal Place of Business 9500 KOGER BLVD STE 203 ST PETERSBURG FL 33702		9500	Mailing Address 9500 KOGER BLVD STE 203 ST PETERSBURG FL 33702				TOO SELECTION OF THE PROPERTY				
City & State  City & State of Status Desired   \$8.75 a Address of New Registered Agent   \$8.75 a Address of New Re	2. Principal f	Place of Business	3. Ma	3. Mailing Address								
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ST PETERSBURG FL 33702  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and a the obligations of registered agent.  SIGNATURE  Signature  Signature  Signature  Signature  FILL NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  NAME  PETRILLO, PHILLIP B  \$25 22ND STREET  BELLEAIR BEACH FL 33786  CITY-ST-2P  TITLE  NAME  SIREET ADDRESS  CITY-ST-2P  TITLE  Change  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ST-2D  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ST-2D  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ST-2D  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ST-2D  ACTHEST ADDRESS  CITY-ST-2P  TITLE  Change  ST-2D  ACTHEST ADDRESS							Street Address /P.O. Pay Number in Not Assessed 1-1					
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12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 (7/39). Florida Statutos Lifetibos partificables and properties as a section 119 (7/39).		ertify that the information	cumplied with this files	da								

12. 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 report or supplemental 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 distee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

NECPHILIPER Petrillo, President

3/13/03

727 577-2116

Daytime Phone #

CHZEU34 (10/02)