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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025347

RECRUITER'S CHOICE, INC.

	(5)	Mailing Ada	drace				AL LIN IBAÍN BAILE BOLL B	ANI BENI BENI I	18 8 1 DEFENDATION	
Principal Place	the state of the s	Mailing Add		•						•
17048 CROSSGATE DR P O BOX 8447 JUPITER FL 33477 JUPITER FL 33468-447							· .			
US US		00100 111			DO NOT WRITE IN THIS SPACE					
						3. Date Incorp 03/21/19	orated or Qualifed			•
2 Principal Pl	lace of Business	2a. Mailing	Address			4. FEI Numbe			App	olied For
21		26				65-06525	541		Not	Applicable
Suite, Apt.	#, etc.		Apt. #, etc.			- Cardifornia	f Status Desired		\$8.75 A	dditional
22		27			,	5. Certificate o	f Status Desired	.	Fee Red	quired
City & State	e	City & S	State			6. Election Ca	mpaign Financing		\$5.00	May Be
23		28 ·				Trust Fund	Contribution		Added to	o Fees .
Zip	Country	Zip		Country		8. This corpor	ation owes the cur	rent year Int	angible	_ •
24	25	29	40	30			roperty Tax.		<u> </u>	□No
	9. Name and Address of Currer	nt Registered Ag	gent		·	10. Name and	Address of New	Registered	Agent	
		Jan Jan San		81	Name		5,			
	ER, ABE			82	Street Ad	dress (P.O. Box Nur	nber is Not Accept	able)		·
	18 CROSSGATE DRIVE						a ersen jen serie	8 13 2 1 1.	100 00000	Labor Front Page
5 JUPI	ITER FL 33477			. 83		1	1、被控制		建筑情報	
				84	City	• • • • • • •		6 194 92 198 94 	85 Zip C	
		6			1			FL	. ` `	•
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508,	, Florida Statutes	s, the above	e-named co	rporation submits thi	s statement for the	purpose of	changing its	registered
office or r	egistered agent, or both, in the State	of Florida. Such	change was au	monzed by	the corpora	IIION S DOBIG OI GIFEC	iors. Thereby acce	br are appoi	in the contract of	9.010.00
⇒ acent la	im familiar with, and accept the obliga	ations of, Section	i 607.0505, Florid	da Statutes						
	m familiar with, and accept the obliga	ations or, Section	607.0505, Florid	da Statutes				٠ درية ريو	· · · · ·	
SIGNATURE	Im familiar with, and accept the obligation of t		607.0505, Florid	da Statutes		ired when reinstating) r 🕢		DATE		•
	Signature, typed or printed name of registered age OFFICERS AN		. (NOTE: F	Registered Agen			/CHANGES TO O			RS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN	mt and title if applicable	. (NOTE: F	da Statutes					ID DIRECTO	•
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN PSTD BOBER, ABE	mt and title if applicable	. (NOTE: F	Registered Agen						RS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered age OFFICERS AN PSTD BOBER, ABE 17048 CROSSGATE DR	mt and title if applicable	. (NOTE: F	Registered Agen 13. 1.1 TITLE 1.2 NAME						RS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSTD BOBER, ABE	mt and title if applicable	(NOTE: F	Registered Agen 13. 1.1 TITLE 1.2 NAME	nt signature requi				☐ Change	RS IN 12
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSTD BOBER, ABE 17048 CROSSGATE DR	mt and title if applicable	(NOTE: F	Registered Agen 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	it signature requirements of ADORESS				☐ Change	RS IN 12
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14. 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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90001 031 ***150.00