## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000028374

1. Entity Name

CERTIFIED HR SERVICES COMPANY



FILED VISION OF CORPORATION

04 JUN 30 PM 4: 48

## DO NOT WRITE IN THIS SPACE

Serger Braker Berger Braker	. ಕೆ.ಜಿ. ಕಷ್ಟಾಪ್ರದ ಚಿತ್ರಗಳಲ್ಲಿ ಎ.ಜಿ.ವಿ. ಆರ್. ಎ.ಡಿ.ಅಟ್ಟಿಯಲ್ಲಿ	the second of th	2 . 19 C . 2		***			(	
2. Principal Place of Business 3. Mailing Add 5101 NW 21ST AVENUE 5101 NW			1ST AVENUE		-	· ————————————————————————————————————			
Suite, Apt. SUITE 35	#, etc. 0	Suite, Apt. #, etc SUITE 350	Suite, Apt. #, etc. SUITE 350			DO NOT WRITE IN THIS SPACE			
City & Stat	TO E EL OPIDA	City & State	City & State			4. FEI Number 650653827			
FORT LAUDERDALE, FLORIDA		FORT LAUDERDALE, FLORIDA			40.75			Not Applicable	
33309 Country USA		Zip 33309	Country USA		5. Certificate of Status Desired Fee R			.75 Additional Required	
				- N	7. Name and Add	ress of Current R	egistered Ag	ent	
DO NÓT W IN THIS SI		Si Market Trades as to the second and the second as the se		Name NRAI Services, Inc.  Street Address (P.O. Box Number is Not Acceptable)  526 E. Park Avenue					
				City Tallaha	hassee FL Zip Code 32301				
	e named entity submits this statement to tions of registered agent.	for the purpose of chang	ging its registere	d office or registe	ered agent, or both, i	n the State of Flori	da. Lam famili	ar with, and accept	
me obliga	tions of registered agent.								
SIGNATURE									
	Signature, typed or printed name of registered ager nuary 1 - May 1 Fee is \$150,00	m and the if applicable.	(NOTE: Registered	Agent signature require	ed when reinstating)		DATE		
	After May 1, Fee Is \$550.00					n Campaign Finar		\$5.00 May Be	
Make Check	Amended UBR is \$61.25 k Payable to Florida Department of	of State			Trust F	und Contribution.		Added to Fees	
10.	OFFICERS AND		New Y				and and	1. July 15 " (2524)	
TITLE	President, Director	7		et de la re	3. W = 2. X 3. X				
NAME	Danny L. Pixler		NAIZ						
STREET ADDRESS	5101 NW 21st Avenue, Ft. L	auderdale, FL 3330	U9 <b>■</b> ∻∵	et adoress		DD	1,5Uc		
CITY-ST-ZIP			131 . 40	ST-ZIP	U1712/I	<u> 1477U1U45</u> 7	~UU3.~*	*53U.UU* \	
TITLE	Treasurer		, imu	25 19 2 BESSELL TO 8	. Ani	)n390	1602	F	
NAME STREET ADDRESS	Rick Steen	auderdale, FL 33309	NAMI	et address		401045-			
CITY-ST-ZIP	5101 NW 21st Avenue, Ft, L		U9 <b>■</b> ≫×:	ST-ZIP				네트를 살아내려왔다.	
TITLE			759 s			903 <u>9</u> 0			
NAME	Secretary		พมม	교사하다 그 관계 시작 나	ም ም ነው ነው። የተመሰው ነው	0401045-		*100.10	
STREET ADDRESS	Peter Campitiello 477 Madison Avenue, 14th F	EL N.Y. NY 10022	STRE	et address	no	NOT V	A/DIT		
CITY-ST-ZIP	477 Madion 770 Mac, 14411	.,	CITY	ST+ZIP			N E		
TITLE			Jini		· STATE	THIS S	:ΡΔΟΙ		
NAME			NALI	2 Sec. 15			-19,020,000		
STREET ADORESS CITY-ST-ZIP			£/1925-as	et address » St-zip					
TITLE		<del></del>	2111 21111				The said		
NAME			s direction is signament	(a) (a) (b) (b) (b) (c) (c)					
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TITLE	]		ींगाँ	1.2 1 1.25					
MANAE	1		สมเล่า		a 有权。2. 1. 声声 Tarifite	· 1965年,1965年1966年1966年1966年1966年1966年1966年1966年	2 - 3 - 4 - 6 ( 180)	多0% (5) [[[為20][5]]	

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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other like ampowered.

STREET ADDRESS

CITY ST ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 28, 2004

(212) 751-1414

Cate

Daytime Phone #

CR2E034B (12/0